## LI6 0000009386

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nar	me)
(D	ocument Number)	
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## **COVER LETTER**

Tallahassee, FL 32314

TO: Registration Section Division of Corporations			
SUBJECT: ELEGANT R	EFLECTIONS LLC		
(Name of Limite	ed Liability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted	ed for filing.		
Please return all correspondence concerning this matter to t	the following:		
ALFRED S	D. So BeC ne of Person)		
(Firm/Company)			
<u>48 FLANDER</u>	PS DRIVE Address)		
BARNEGAT, (City/State	New Jeesey 08005 te and Zip Code)		
For further information concerning this matter, please call:			
ALFRED S. SOBEL (Name of Person)	at ( <u>239</u> ) <u>273 - 8664</u> (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
xi \$25.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
Mailing Address:	Street Address:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

l.	The name of a limited liability company is
	ELEGANT REFLECTIONS LLC
2.	The Articles of Organization were filed on $1-13-2016$ and assigned
	document number
3.	The delayed effective date the dissolution if not effective on the date of filing:  (effective date cannot be prior to or more than 90 days later than date document is received for filing)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	MOVING OUT OF STATE
	7028 DFC   <b>0</b>
	<u> </u>
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	ALFRED S. SoBEL
	48 FLANDERS DRIVE
	BITENCEAT, NJOSCOS
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and fisted ove to wind up the company's activities and affairs:
	Upel Strawn ALFRON 5. SOBEL
	Signature   Printed Name

FILING FEE: \$25.00