

From: Johana Giraldo  
1/29/2018

Fax: (305) 670-1991

To:

Fax: (250) 617-6383

Page 2 of 3 01/30/2018 10:56 AM

**U6000034199**  
Florida Department of  
Division of Corporations  
Electronic Filing System

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H18000034199 3)))



H180000341993ABC2

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.  
Account Number : 120080000090  
Phone : (305)670-1991  
Fax Number : (305)670-1993

**FILED**  
2018 JAN 30 A 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC DISSOLUTION OR WITHDRAWAL  
PURPLE FRIDAY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

**RECEIVED**  
JAN 30 2018

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

D. SCOTT  
JAN 31 2018

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
PURPLE FRIDAY LLC

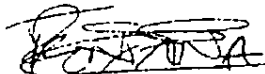
2. The Articles of Organization were filed on 01/26/2016 and assigned  
document number L16000018359

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).  
100% OF THE MEMBERS AGREED TO FILE FOR A COMPLETE DISSOLUTION

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and  
listed above to wind up the company's activities and affairs:



Signature

FRONTINI, ROXANA E

Printed Name

2018 JAN 30 A 10:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED