Division of Corporations Electronic Filing Cover Sheet

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To:

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

From:

Account Name : PAGIO'S & ASSOCIATES, LLC
Account Number : I20100000043
Phone : (305)397-8553
Fax Number : (305)397-8521

LLC DISSOLUTION OR WITHDRAWAL ZEN BEAUTY CENTER LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

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Corporate Filing Menu

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COVER LETTER

TO:

Registration Section Division of Corporations

ZEN BEAUTY CENTER LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following.

| JEANETTE FONT | |
|---|------------------|
| (Name of Person) | |
| ZEN BEAUTY CENTER LLC | |
| (Firm/Company) | > 25 |
| 5701 COLLINS AVE, PH 21 | |
| (Address) | : 555 |
| MIAMI BEACH, FL 33140 | |
| (City/State and Zip Code) | |
| | <u> </u> |
| mation concerning this matter, please call. | ى م |
| -00 007 07 | \ - 4 |

For further info

JEANETTE FONT

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

■ \$25,00 Filing Fest and Certificate of Dissolution

🗆 \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tailahassee, FL 32301

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| | e name of a limited liability company is EN BEAUTY CENTER LLC | <u> </u> | |
|------------|---|---|------------------|
| The | e Articles of Organization were filed on | _ and assigned | |
| doc | cument number | | |
| No | ne 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 do not meet the date inscreted in this block does not meet the applicable statutory filing rested as the document's effective date on the Department of State's records. | 03/12/2019 document is received for filing) equirements, this date will not | t be |
| A c 605 | description of occurrence that resulted in the limited liability company's di 5.0707, Florida Statutes, (copy 605.0707 on back cover letter). | ssolution pursuant to section | on |
| | MPANY IS OUT OF BUSINESS | | |
| | | | |
| | there are no members, enter the name and address of the person appointed | to wind up the company's | |
| | there are no members, enter the name and address of the person appointed tivities and affairs: | to wind up the company's | ٠ |
| | | | |
| | | |) |
| | | . 19 |] - n |
| act | ignature of an authorized person or if there are no members, the signature of above to wind up the company's activities and affairs: | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 |] - n o |
| act | ignature of an authorized person or if there are no members, the signature of above to wind up the company's activities and affairs: JEANETTE FONT | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 |] - n o |

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

| Name of Limited Liability Company: ZEN BEAUTY CENTER LLC | |
|--|----------------------|
| Document number of Limited Liability Company is: L16000076797 | |
| Date of dissolution was: 03/12/2019 | |
| Description of information that must be included in a written claim: | |
| BRIEF INFO OF CLAIM AND CONTACT INFORMA | ATION. |
| | 27 |
| | |
| | ; <u> </u> |
| | |
| | ज़ |
| Mailing address where claims can be sent (Claims cannot be sent to the Division of Corp | corations) |
| 5701 COLLINS AVE, PH 21 | _ |
| MIAMI BEACH, FL 33140 | · · |
| | |
| | = |
| - | • |
| A claim against the above named limited liability company will be barred unless a proceed claim is commenced within 4 years after the filing of this notice. | eding to enforce the |
| JEANETTE FONT | |
| Printed Name of the Person Filing Signature of the Pers | son Filing |

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00