

L16000077346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000438114210

FILED

2024 OCT 23 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LUCKY MOUSE GIFTS, 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:

DENNIS PAWLAK
(Name of Person)

LUCKY MOUSE GIFTS
(Firm/Company)

804 VIA DEL SOL DR
(Address)

DAVENPORT FL 33896
(City/State and Zip Code)

For further information concerning this matter, please call:

DENNIS PAWLAK at (314) 5489-5503
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2024 OCT 23 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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

1. The name of a limited liability company is

LUCKY MOUSE GIFTS, LLC

2. The Articles of Organization were filed on 4-19-2016 and assigned

document number 416000077346

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).

SOLD THE BUSINESS

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

DENNIS PAWLAK
804 VIA DEL SOL DR
DAVENPORT FL 33896

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

DENNIS PAWLAK
Printed Name

FILING FEE: \$25.00

2024 OCT 23 PM 4:21
DEPARTMENT OF STATE
TALLAHASSEE, FL

FILED