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N. CAUSSEAUX MAR 16 2018

## **COVER LETTER**

**TO:** Registration Section **Division of Corporations** MBER: L16000098696 DOCUMENT NUMBER: The enclosed Notice of Limited Liability Company Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kan Feingold (Name of Contact Person Dolar Birthday Club UC
(Firm/Company)
11025 Lake Katherine Circle
(Address) ClerMont, FL 347//
(City/State and Zip Code) For further information concerning this matter, please call: eringold at (407) 301-4333 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: □\$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed) Certified Copy (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  Dollar Birthday Club UC
	· · · · · · · · · · · · · · · · · · ·
2.	The Articles of Organization were filed on $\frac{5}{20}\frac{20}{6}$ and assigned
	document number
3.	The delayed effective date the dissolution if not effective on the date of filing: 3/17/8  (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 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).
-	All parties involved have agreed to dissolve the CCC due to running out of funds and lack of
-	due to running out of funds and lack of
	Company in come.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	Ran Fernsold
	11025 Lake Katherine Circle
	Clermant, FL 34711
6. list	Signature of an authorized person or if there are no members, the signature of the person appointed and ed above to wind up the company's activities and affairs:
	Mod A. Feingold
	\ Signature Printed Name
	FILING FEE: \$25.00

## Notice of Limited Liability Company Dissolution

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: Document number of Limited Liability Company is: Date of dissolution was: Description of information that must be included in a written claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. Signature of the Person Filing