1170000048964

| (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



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FILED 2019 MAY -3 PH 6: 26

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COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|--|--|
| SUBJECT: Athina's Re-clesign & Staging Services 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: | | |
| ATHINA PRIDE | | |
| (Name of Person) | | |
| | | |
| | | |
| (Firm/Company) | | |
| | | |
| Briancliff Manor, NY, 10510 | | |
| (City/State and Zip Code) | | |
| | | |
| For further information concerning this matter, please call: | | |
| | | |
| Athina Pride at 914, 954-1594 | | |
| (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 STREET/COURIER ADDRESS: Registration Section Division of Corporations | | |

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability company is Athina's Re-Design & Staging Services LLC. |
|-----------|--|
| 2. | The Articles of Organization were filed on $3/\sqrt{g}/7$ and assigned |
| | document number <u>L17000048964</u> |
| 3. | The delayed effective date the dissolution if not effective on the date of filing: May 30, 2019 (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). |
| | Moved out of State on Oct 20,2018 = |
| | |
| | <u></u> |
| | PR C T |
| | 6: 26 |
| 5. | If there are no members, enter the name and address of the person appointed to wind up the company's |
| | activities and affairs: Athina Pride |
| | 345 N. State Rd (Apt. B2.I) |
| | Briancliff Manor, NY. 10510 |
| | Briancliff Manor, NY. 10510 tel. 914.954.1594 athinapride@yahoo.com |
| 6. lis | Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs: |
| | A Pride Athina Pride |

FILING FEE: \$25.00

Printed Name

Signature