

L17000079850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

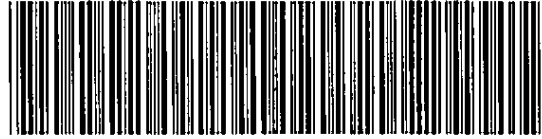
(Document Number)

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02/11/19--01016--001 **43.75

03/18/19--01003--022 **11.25

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S TALLENT
MAR 18 2019

FILED
MAR 15 AM 11:06
MAR 15 2019

V/D



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 4, 2019

THOMAS A. MORGAN
CONFESSIONS OF A LULAHOLIC, LLC
21136 LADY MARION WAY
LEESBURG, FL 34748

SUBJECT: CONFESSIONS OF A LULAHOLIC, LLC
Ref. Number: L17000079850

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE NOTICE OF LIMITED LIABILITY COMPANY DISSOLUTION MUST BE FULLY COMPLETED IN ORDER TO FILE THE DOCUMENT. THE CHECK IS BEING RETURNED SO IT CAN REMAIN WITH THE DOCUMENT. PLEASE COMPLETE AND RESUBMIT ALL FORMS, INCLUDING THE CHECK.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 319A00004407

RECEIVED
2019 MAR 15 AM 10:49
SEC. OF STATE
TALL. FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 19, 2019

THOMAS A. MORGAN
CONFESSIONS OF A LULAHOLIC, LLC
21136 LADY MARION WAY
LEESBURG, FL 34748

SUBJECT: CONFESSIONS OF A LULAHOLIC, LLC
Ref. Number: L17000079850

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

IF YOUR INTENTION IS TO DISSOLVE YOUR LLC, PLEASE COMPLETE THE FORM PROVIDED AND RESUBMIT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 719A00003563

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2019 MAR -1 AM 11:42
SECRET
TALL
STATE
FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Confessions of a Lulaholic, 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:

Thomas A. Morgan
(Name of Person)

Confessions of a Lulaholic
(Firm/Company)

21136 Lady Marion Way
(Address)

Leesburg, FL 34748
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas A. Morgan at (863) 990-6900
(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/COURIER ADDRESS:

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

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

1. The name of a limited liability company is

Confessions of a Lulaboholic, LLC

2. The Articles of Organization were filed on 4/10/2017 and assigned

document number L17 000079850

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).

Business was never established other
than filing for LLC.

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

Thomas A. Morgan
21136 Lady Marion Way
Leesburg, FL 34748

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

Thomas A. Morgan
Printed Name

FILING FEE: \$25.00

FILED
19 MAR 15 AM 11:38
CLERK OF COURT
STATE OF FLORIDA