

L17000083836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

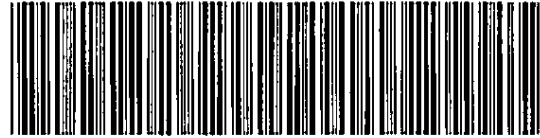
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Ms. Lotzniker gave
authorization to add
closed business for
occurrence statement
4/28/2020
dec

Signature 6206

Office Use Only



500337840965

12/10/19--01016--035 **25.00

FILED
CLERK OF STATE
OFFICE OF CORPORATIONS
20 JAN 28 PM 4:50

Dissolution

JAN 28 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOTZ CONSULTING 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:

JESSICA LOTZNIKER

(Name of Person)

LOTZ CONSULTING LLC

(Firm/Company)

7900 HARBOR ISLAND DR. APT 1413

(Address)

MIAMI, FL. 33141

(City/State and Zip Code)

For further information concerning this matter, please call:

JESSICA LOTZNIKER

305

9276155

at (

(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

FILED
JAN 20 2010
DIVISION OF CORPORATIONS
TALLAHASSEE, FL
20 JAN 20 PM 4: 50



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 6, 2020

JESSICA LOTZNIKER
LOTZ CONSULTING LLC
7900 HARBOR ISLAND DR., APT 1413
MIAMI, FL 33141

SUBJECT: LOTZ CONSULTING LLC
Ref. Number: L17000083836

We have received your document for LOTZ CONSULTING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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.

Diane Cushing
Senior Section Administrator

Letter Number: 420A00000287

2020 JAN 22 PM 1:19

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

1. The name of a limited liability company is
LOTZ CONSULTING LLC

2. The Articles of Organization were filed on APRIL 14 2017 and assigned
document number L170000838336

3. The delayed effective date the dissolution if not effective on the date of filing: 11/14/19
(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).

Closed business

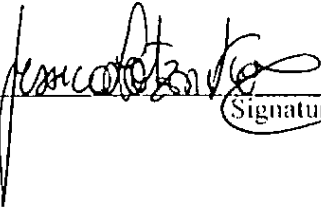
CLERK OF STATE
DIVISION OF CORPORATIONS
LLC
20 JAN 28 PM 4: 50

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

7900 HARBOR ISLAND DR APT #1413

MIAMI BEACH, FL 33141

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

JESSICA LOTZNIKER

Printed Name

FILING FEE: \$25.00