

L17000147665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

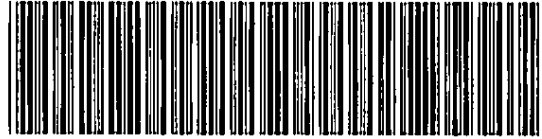
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/08/19--01023--023 \*\*25.00

APR 17 2019 11:51 AM

2019-APR-8 PM 4:01

APR 17 2019  
MCCNAIR

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LISA'S HOLDINGS  
(Name of Limited Liability Company)

2018 APR -8 PM 4:07

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Oliveira

(Name of Person)

(Firm/Company)

865 Sailfish Ct

(Address)

Pensacola FL 32507

(City:State and Zip Code)

For further information concerning this matter, please call:

David Oliveira

(Name of Person)

at ( 850 ) 293-2850

(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) *DC*

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

2018 APR -8 PM 4:07  
FILED  
TALLAHASSEE  
FLORIDA

1. The name of a limited liability company is  
LISA'S HOLDINGS

2. The Articles of Organization were filed on July 10 2017 and assigned  
document number 600301186366

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).  
Change of plans....no transactions completed during the company's existence

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

865 Sailfish CT  
Pensacola, FL 32507

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:

David Oliveira  
Signature

David Oliveira

Printed Name

FILING FEE: \$25.00