# L17000 196886

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TALLAHASSEE ELOPINA

OCT 2 9 2018 S. YOUNG

# **COVER LETTER**

Division of Corporations					
SUBJECT: The Mermaid Gr (Name of	cotto				
SUBJECT: hermand (Name of	Limited Liability Company)				
The enclosed Articles of Dissolution and fee(s) are st	ubmitted for filing.				
Please return all correspondence concerning this matt	ter to the following:				
Oxistina	il aidac				
<u>Cristine</u> S	(Name of Person)				
Paparazzi	(Firm/Company)				
	(Firm/Company)	ı			
13640 1584	` S+ W	ĭ oc			
	(Address)	∄ੇ ह	2	TI	
(City/State and Zip Code)  For further information concerning this matter, please call:				=	
Tupiter R 33478  (City/State and Zip Code)					
	יר. דר	3.// <b>5</b> ⊊	Ē	U	
For further information concerning this matter, please	e call:		;⁴ ⊇		
Cristine Schneider (Name of Person)	at ( 501 ) 727 Oco E (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:	STREET/COURIER ADDRES	SS:			
Registration Section	Registration 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	
The Mermaid E	rotto.
2. The Articles of Organization were filed on9_	_
document number	<u> </u>
3. The delayed effective date the dissolution if not eff (effective date cannot be prior to or me Note: If the date inserted in this block does not meet the listed as the document's effective date on the Department.	ore than 90 days later than date document is received for filing) e applicable statutory filing requirements, this date will not be
605.0707, Florida Statutes, (copy 605.0707 on back	·
Not required as an	Independent Consultant
For Papacare: Access	Do not experies
make exough profit	A ST P
	SSEE F
If there are no members, enter the name and address activities and affairs:	
6. Signature of an authorized person or if there are no listed above to wind up the company's activities and a	members, the signature of the person appointed and ffairs:
Crist Schut	Cristine Schneider
Signature	Printed Name

FILING FEE: \$25.00

## Notice of Limited Liability Company Dissolution

#### **NOTE:** This page is optional

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: The Mermaid Grotto
Document number of Limited Liability Company is: LITOO0196286
Date of dissolution was: 10/15/18 carled on 9/22 I believe & dissolve.  Description of information that must be included in a written claim:
I never needed an UC to sell \$5 Jewelry as an independent consultant For Paparazzi Accommiss. Not needed.
Jewelry as an independent consultant
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  13640 1584 84 North
13640 1584 St North Sm \$
Jupiter Fr 33478
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

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

Printed Name of the Person Filing