

L17000211651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

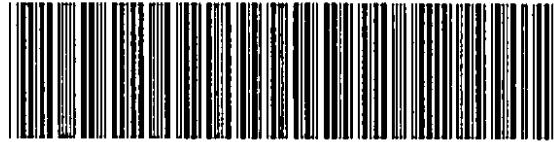
(Business Entity Name)

(Document Number)

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

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03/25/19--01019--025 \*\*25.00

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AND  
FILED  
2019 MAR 25 PM 4:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T.S.  
04/05/19

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** **FABULOUS DELIGHTS 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:

**WILLIAM JOHN MESSINA SOLE MBR**

(Name of Person)

**FABULOUS DELIGHTS LLC**

(Firm/Company)

**18835 DUQUESNE DR**

(Address)

**TAMPA, FL 33647**

(City/State and Zip Code)

SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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For further information concerning this matter, please call:

**William Messina**

(Name of Person)

at (

**813**

**380-0343**

(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

FABULOUS DELIGHTS LLC

2. The Articles of Organization were filed on 10-18-2017 and assigned

document number EIN 82-3121859

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).

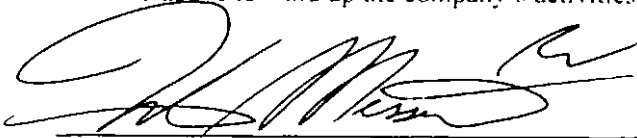
FABULOUS DELIGHTS LLC never got off the ground, nothing was initiated due to change in focus.

The owner voluntarily elected to end the life of this business.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: William Messina (no employees ever hired)

18835 Duquesne Drive Tampa, Florida 33647-3422

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

William Messina

Printed Name

**FILING FEE: \$25.00**

APPROVED  
AND  
FILED

2019 MAR 25 PM 4:04  
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TAMPA  
FLORIDA  
STATE  
DEPARTMENT OF  
REVENUE