# 417000232582

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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18 JUN 29 PH 12: 56

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JUL -5 2018

## **COVER LETTER**

TO:	Registration Section
	Division of Corporations

CYNTHIA ABOOD LLC

(Name of I mited Liability Company)

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

Please return all correspondence concerning this matter to the following:

CYNTHIA ABOOD	
(Name of Person)	
CYNTHIA ABOOD, LLC	
(Firm/Company)	
1276 BAYVIEW CIRCLE	
(Address)	
WESTON, FL 33326	

For further information concerning this matter, please call:

CYNTHIA ABOOD	<sub>at (</sub> 954	, 655-0712 <b>6</b>
(Name of Person)	(Area Code	& Daytime Telephone Number)

(City/State and Zip Code)

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee and Certificate of Dissolution □ \$55.00

☐ \$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

		A LIMITED LIABILITY COMPANY	FILE	- 1
1.	The name of a limited liabili	ity company is	FILE 18 JUN 29	PH I
2.	The Articles of Organization	n were filed on	and assigned	\$7.; 1.:
	document number L1700023	2582		
3.	Note: If the date inserted in the	he dissolution if not effective on the date of fidate cannot be prior to or more than 90 days later than dhis block does not meet the applicable statutory filitive date on the Department of State's records.		be
4.	A description of occurrence 605.0707, Florida Statutes, (	that resulted in the limited liability company copy 605.0707 on back cover letter).	s dissolution pursuant to section	n
	I HAVE NEVER ACTIVATED	THIS BUSINESS SINCE NOVEMBER AND A	T THIS TIME WILL.	
	DISSOLVE IT.		· · · · · · · · · · · · · · · · · · ·	
5.	If there are no members, ent activities and affairs:	er the name and address of the person appoint CYNTHIA ABOOD	ed to wind up the company's	
		1276 BAYVIEW CIRCLE		
		WESTON, FL 33326		
6. lis	Signature of an authorized pated above to wind up the con	person or if there are no members, the signatur npany's activities and affairs:	e of the person appointed and	
$\int$	Inth Olsed	Cynl	ha A-bood	
	Signature	FILING FEE: \$25.00	nted Name	