## 117000234615

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Lacinosa Limi, ricino,				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				
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Office Use Only



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FILED
2018 AUG 24 PH 3: 52

## **COVER LETTER**

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

WATER LLC				
ed Liability Company)				
ed for filing. he following:				
e of Person)				
ZERO DEGREE ICE CREAM CLEARWATER LLC				
n/Company)				
Address)				
e and Zip Code)				
at ( 212 ) 334-5420				
(Area Code & Daytime Telephone Number)				
☐ 855.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
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

## FILED

; :

1	The name of a limited liability	company is	2018 AUG 24 PM 3: 52	
1.	ZERO DEGREE ICE CRE	, · ·	SEURETARY OF STATETALLAHASSEE-FL	
2.	The Articles of Organization v		and assigned	
	document number <u>L1700023</u>	4615		
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 th 605.0707, Florida Statutes, (co	at resulted in the limited liability con py 605.0707 on back cover letter).	npany's dissolution pursuant to section	
	The_business_was_closed_on_	07/31/2018		
5.		the name and address of the person a	appointed to wind up the company's	
	-	11 E. BROADWAY, STE#5B, NEV	W YORK, NY 10038	
	-			
6. lis	- Signature of an authorized per ited above to wind up the compa	son or if there are no members, the si any's activities and affairs:	gnature of the person appointed and	
	Un Voug Mh	HANGAIG	CUCN	
	Signature	LINYONG	Printed Name	
	/			

FILING FEE: \$25.00