

217000258937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

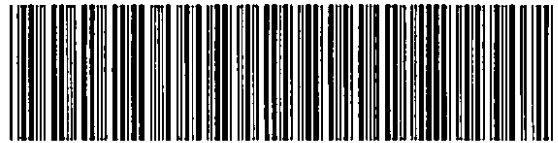
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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01/14/19--01019--012 \*\*30.00

2019 JAN 14 A 1:37  
CLERK OF DISTRICT COURT  
TALLAHASSEE FLORIDA

FILED

1/17/19 QS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Monthly Bloom-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:

Diana Rodriguez.  
(Name of Person)

Monthly Bloom.  
(Firm/Company)

324 West 53<sup>rd</sup> St Hialeah FL 33012  
(Address)

Hialeah FL 33012  
(City/State and Zip Code)

2019 JAN 14. A 1:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

DIANA Rodriguez. at (786) 332 1366.  
(Name of Person) (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

Mommy Bloom LLC

2. The Articles of Organization were filed on 12/20/17 and assigned

document number L17000258937

3. The delayed effective date the dissolution if not effective on the date of filing: 01/1/19  
(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).

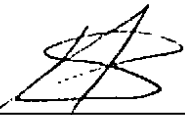
This company is not being used.

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

Diana Rodriguez

324 W 83 St Hialeah FL 33012

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

Diana Rodriguez

Printed Name

**FILING FEE: \$25.00**

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2019 JAN 14 A 1:37  
CLERK OF THE  
DEPARTMENT OF  
STATE  
TALLAHASSEE  
FLORIDA

## 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: MONTINLY Bloom LLC.

Document number of Limited Liability Company is: L17000258937.

Date of dissolution was: 1/1/19

Description of information that must be included in a written claim:

This company is not being used.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

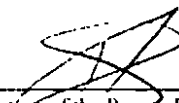
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

324 West 53 St Hialeah FL 33012.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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.

DIANA RODRIGUEZ.  
Printed Name of the Person Filing

  
Signature of the Person Filing

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

2019 JAN 14 A 1:37  
STATE OF FLORIDA  
TALLAHASSEE

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