

L180000 43564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dissolution of Berny's Hair Studio

DOCUMENT NUMBER: L18000043564

The enclosed Notice of Limited Liability Company Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bernice Kelley

(Name of Contact Person)

Berny's Hair Studio

(Firm/Company)

8529 NW 40th Terr.

(Address)

Gainesville, Florida 32653

(City/State and Zip Code)

For further information concerning this matter, please call:

Bernice Kelley

(Name of Contact Person)

at (352)

(Area Code)

681-0797

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

(Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment 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

Bernie's Hair Studio

2. The Articles of Organization were filed on February 19, 2018 and assigned

document number L18000043564

3. The delayed effective date the dissolution is not effective on the date of filing: 11-31-2018
(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).

The Building where my business was
conducted was poed, I was asked to leave.
I could not afford to move my business
to another location.

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

Bernice C. Kelley
8529 N.W. 40th Ter.
Gainesville FL 32653
352-681-0797

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:

Bernice C. Kelley
Signature

Bernice C. Kelley
Printed Name

FILING FEE: \$25.00