

L18000 191509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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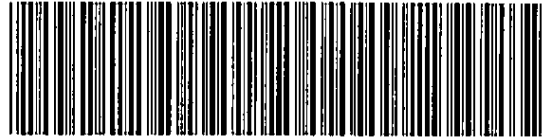
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HOLLIE, SALLIE, MAGGIE, 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:

Lanice McDonald  
(Name of Person)

(Firm/Company)

PO Box 20323  
(Address)

Charleston, SC 29413  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lanice McDonald  
(Name of Person)

at ( 843 ) 789-9176  
(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

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

HOLLIE, SALLIE, MAGGIE, LLC

2. The Articles of Organization were filed on 08/10/2018 and assigned

document number L-18000 191509

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).

Sold the Real estate property the  
LLC was created for on 07/09/2019

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

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:

Lanice McDonald  
Signature

Lanice McDonald  
Printed Name

**FILING FEE: \$25.00**

ck # 1520