

L18 000 197172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

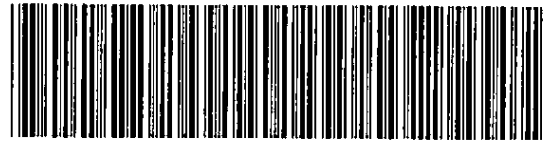
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/16/20--01010--008 **25.00

20 JAN 16 PM 3:00
FEB 13 2020
C. McNAIR

FEB 13 2020
C. McNAIR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lighthouse Suite, LLC
(Name of Limited Liability Company)

RECEIVED
DIVISION OF CORPORATIONS
20 JAN 16 PM 3:00

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

Please return all correspondence concerning this matter to the following:

Joan Larkin
(Name of Person)

(Firm/Company)

1012 N. Ocean Blvd. Apt PH6
(Address)

Pompano Beach FL 33062
(City/State and Zip Code)

For further information concerning this matter, please call:

Joan Larkin at (954) 941 5644
(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

FILED
IN THE OFFICE OF THE
CLERK OF THE STATE
20 JAN 16 PM 3:00

1. The name of a limited liability company is

Lighthouse Suite LLC

2. The Articles of Organization were filed on 8/16/18 and assigned

document number L180000197172

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).

Property sold and business closed
per agreement of both members/
managers.

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

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:

Joan Larkin, mgr
Signature

Joan Larkin
Printed Name

FILING FEE: \$25.00