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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Hatley Street Cafe, LLC (Name of Limited Liability Company)			
(Name of Limited Liability Company)			
The enclosed Articles of Dissolution and fee(s) are subm	nitted for filing.		
Please return all correspondence concerning this matter t	to the following:		
Lisa S	St. John		
(Name of Person)			
(Firm/Company)			
801 San	Fernando St.		
•	(Address)		
Fernandina	Beach, FL 32034  State and Zip Code)		
(Chys	tate and Zip Code)		
For further information concerning this matter, please ca	II:		
Lisa St. John (Name of Person)	at (863) 673-2727  (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

1. The name of a limited liability company is	
	Hatley Street Cafe, LLC
2.	The Articles of Organization were filed on $\frac{2/14/2019}{}$ and assigned
	document number <u>L 18000 24359</u> 7
3,	The delayed effective date the dissolution if not effective on the date of filing: Dec. 1, 2021  (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).
	Covid 19 resulted in the dissolution
	of Hatley Street Cafe, LLC, as agreed
	by Lisa St. John and Gregor St. John
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. al	Signature of an authorized person or if there are no members, the signature of the person appointed and liste ove to wind up the company's activities and affairs:
	Lisa St. John Lisa St. John
	Signature Printed Name

FILING FEE: \$25.00