

49000028012

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

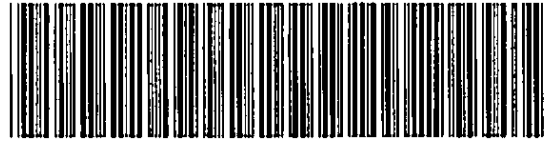
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 NOV 28 AM 7:22

STATE
TALLAHASSEE, FL

1. 2/2/2017

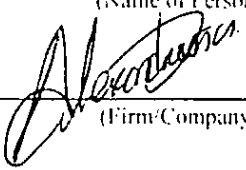
COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PEGGY'S STYLE 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:

Peggy Alexandra Duenas Vargas
(Name of Person)

(Firm/Company)
7696 NW 5TH ST. APT. 3G
(Address)
Plantation, FL 33324-7926
(City/State and Zip Code)

For further information concerning this matter, please call:

Peggy A. Duenas at (954) 8567415
(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

1. The name of a limited liability company is

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PEGGY'S STYLE LLC

SECRETARY OF STATE
TALLAHASSEE, FL

2. The Articles of Organization were filed on January 28 / 2019 and assigned

document number L19000028012

3. The delayed effective date the dissolution if not effective on the date of filing: 12-31-2020
(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 business had to close its doors due to
Covid-19 law regulations. Once the businesses were
able to open, the business was not able to be
financially stable, therefore, it stop and folded.

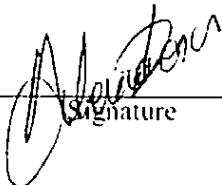
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: MR Pegui Duenas

7696 NW 5 Street

3G

Plantation, FL 33324

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

Pegui Duenas
Printed Name

FILING FEE: \$25.00