

L19000163671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Lawn Care with Love "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:

Cerinel Valbrun  
(Name of Person)  
Lawn Care with Love  
(Firm/Company)  
6302 Brookhill Circle  
(Address)  
Orlando FL 32810  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lise N. Joseph at (786) 369 9321  
(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

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2023 JUN 12 PM 3: 33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

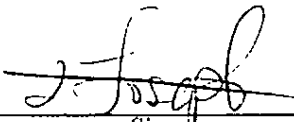
1. The name of a limited liability company is Lawn Care with Love "LLC"
2. The Articles of Organization were filed on 06/21/2019 and assigned  
document number L19000163671
3. The delayed effective date the dissolution if not effective on the date of filing: April 21<sup>st</sup> 2023  
(effective date 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).

Due to lack of customers and income,  
also deciding to evolve<sup>n</sup> something different  
that will <sup>benefit</sup> my family and I. Thank you.

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Cerine Valbrun 6302 Brookhill Cir  
Lise n Joseph Orlando, FL 32810

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

Cerine Valbrun  
Printed Name

FILING FEE: \$25.00