

| (Requestor's Name) |
|---|
| (Address) |
| (Mariess) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| | stration Section sion of Corporations | | | |
|-------------------|--|---|---------------------|-----------|
| SUBJECT: | LOVESPELLZ LLC | | | |
| SUBJECT: _ | (Name of Limite | ed Liability Company) | | |
| The enclosed a | Articles of Dissolution and fee(s) are submitt | ted for filing. | | |
| Please return a | all correspondence concerning this matter to | the following: | | |
| | JIMMY L. LOVE JR. | | | |
| | (Nan | ne of Person) | | |
| | n/Company) | | | |
| | | | | |
| | (, | Address) | | |
| | FLORIDA CITY, FLORIDA 33034 | | | |
| | (City/Sta | te and Zip Code) | | |
| For further inf | formation concerning this matter, please call: | | | |
| JIMMY L. LOVE JR. | | 305 799-8782 (2) | 207 | |
| | (Name of Person) | (Area Code & Daytime Telephone Number)(**) | 2023 FEB | 31.3 p. 5 |
| Enclosed is a ch | neck for the following amount: | 35 | $\overline{\omega}$ | |
| ■ \$25.0 | 0 Filing Fee and Certificate of Dissolution | S55.00 Filing Fee, Certificate of Dissolution & (1) Certified Copy (additional copy is enclosed) (1) (2) (3) (4) | 30:11 四 | 7.75 |
| | ing Address: | Street Address: | - | |
| | istration Section | Registration Section | | |
| | sion of Corporations | Division of Corporations | | |
| P.O. Box 6327 | | The Centre of Tallahassee | | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1 2 1 2 5 Ca

| 1. | The name of a limited liabili | ity company is | | · | | | | |
|----|--|--|--|---|------|--|--|--|
| 2. | The Articles of Organization | n were filed on JUNE 2 | 23, 2020 | and assigned | | | | |
| | document number L2000017 | 4539 | | | | | | |
| 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 605.0707, Florida Statutes, (| that resulted in the lin copy 605.0707 on bac | nited liability compark cover letter). | ny's dissolution pursuant to section | 1 | | | |
| | Business is no longer active the | refore there is no need f | or the LLC. | | | | | |
| 5. | If there are no members, ent activities and affairs: | er the name and addre | | ointed to wind up the company's | | | | |
| | activities and arrains. | 226 NW 5TH AVENU | JE | CRETER TO THE PROPERTY OF THE | *** | | | |
| | | FLORIDA CITY, FLO | ORIDA 30334 | | | | | |
| 6. | Signature of an authorized p | person or if there are no | o members, the signa | ature of the person appointed and li | sted | | | |
| ab | ove to wind up the company | 's activities and affairs | 5: | | | | | |
| | . 1. <i>0</i> | 7 / | | | | | | |

FILING FEE: \$25.00