

H21000182004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

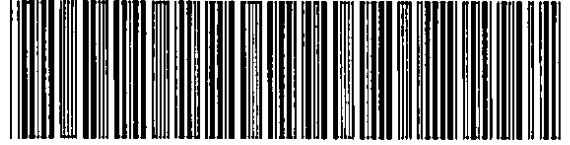
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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300377648643

Effective Date 01/02/2022

12/13/21--01030--005 **25.00

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2021 DEC 13 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FL

Dissolution

DEC 28 2021
D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cashmere and Grace, 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:

Susan Huffman
(Name of Person)
Cashmere and Grace, LLC
(Firm/Company)
2810 Miracle Pkwy
(Address)
Cape Coral, FL 33914
(City/State and Zip Code)

For further information concerning this matter, please call:

Susan Huffman at (812) 406-7299
(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

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STATE OF FLORIDA
TALLAHASSEE, FL

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Cashmere and Grace, LLC

2. The Articles of Organization were filed on April 20, 2021 and assigned

document number L21000182-004

3. The delayed effective date the dissolution if not effective on the date of filing: Jun 2, 2022
(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.

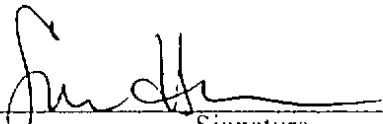
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes. (copy 605.0707 on back cover letter).

Went out of business. No longer needed. Moving out of the state in 2022.

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

Susan Huffman
2810 Miracle Pkwy
Cape Coral, FL 33914

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

Susan Huffman
Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA