

121 000375246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

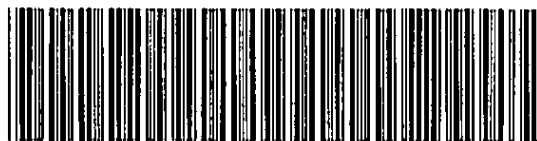
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121 000375246

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FILED
077 APR 13 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: You-Nique Body Spa, 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:

Patricia Hartfield
(Name of Person)

You-Nique Body Spa, LLC
(Firm/Company)

4651 Babcock St NE Unit 18 #324
(Address)

Palm Bay, FL 32905
(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia Hartfield at (321) 271-5823
(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

APR 13 PM 3:09

SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is

You-Nique Body Spa, LLC

2. The Articles of Organization were filed on July 29th 2021 and assigned

document number L21000375246

3. The delayed effective date the dissolution if not effective on the date of filing: September 1st 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).

Currently There is no location to do business -
There hasn't been a location for a while now
- equipment, products, and supplies have been ^{in my} home.
No location, No time at this moment, and No income

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

Patricia Hartfield

4651 Babcock St NE Unit 18 #324

Palm Bay, FL

32905

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:

Patricia Hartfield
Signature

Patricia Hartfield
Printed Name

FILING FEE: \$25.00