

| (Requestor's Name) |
|---|
| (Address) |
| (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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| |
| umils |
| Office Use Only |



04/18/24--01019--018 **25.00



COVER LETTER -

| TO: | Registration Section Division of Corporations | | | | | | |
|----------------|--|-----------------------------------|---|--|--|--|--|
| SUBJE | | me Moon Limited Liability Cor | | | | | |
| The end | closed Articles of Dissolution and fee(s) are s | ubmitted for filing. | | | | | |
| Please r | Please return all correspondence concerning this matter to the following: | | | | | | |
| | Melissa | (Name of Person) | | | | | |
| address a | t <u>2020 Buescher</u> the Melbourne, FL 3 | (Firm/Company) Hill St. (Address) | Current address > # 106 | | | | |
| applying for L | e Melbourne, the | BA935 Pity/State and Zip Code) | Melbaurno, F2 38 | | | | |
| For furt | ther information concerning this matter, pleas | se call: | | | | | |
| | Melissa Lopez (Name of Person) | at (| 200 -3880 Code & Daytime Telephone Number) | | | | |
| Enclosed | d is a check for the following amount: S25.00 Filing Fee and Certificate of Dissolution | □ \$55.00 Fi Certific | iling Fee, Certificate of Dissolution & ed Copy (additional copy is enclosed) | | | | |
| | Mailing Address: Registration Section Division of Corporations P.O. Box 6327 | Division | ress: ion Section of Corporations re of Tallahassee | | | | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability company is Winsome Moon, LLC | |
|----------|--|-----------------|
| 2. | The Articles of Organization were filed on 1011312021 and assigned | |
| | document number <u>L21000447675</u> | |
| 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 no 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 sectio 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). | n 🗇 |
| | The business idea was never executed and there | |
| | is no need to keep the LLC. | |
| | | |
| | | |
| 5. | If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Melissa Lopez | |
| | address at time 2020 Buescher Hill St Cument address |) 100 7 (|
| | OF applying for Melbourne, FL 32935 Melbourne | #101 Lyno, f |
| | | |
| 6. ab | Signature of an authorized person or if there are no members, the signature of the person appointed and I bove to wind up the company's activities and affairs: | isted |
| <u>}</u> | Melissa Lopez Signature Melissa Lopez Printed Name | |
| | | |

FILING FEE: \$25.00