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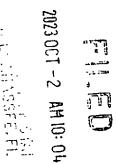
| (Requestor's Name) | | | | | | |
|---|--|--|--|--|--|--|
| (Address) | | | | | | |
| (Address) | | | | | | |
| (City/State/Zip/Phone #) | | | | | | |
| (Only Otales Ziph Notice II) | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
| (Business Entity Name) | | | | | | |
| | | | | | | |
| (Dacument Number) | | | | | | |
| (Bocument Number) | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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P.O. Box 6327

| | COVER | RLETTER | | | | |
|------------------|--|--|----------------------|---------------------------|--|--|
| | stration Section ion of Corporations | | | | | |
| SUBJECT: | DAISY'S EMBROIDERY AND CRAFTS, LLC | | | | | |
| SOBJECT | | | | | | |
| The enclosed A | Articles of Dissolution and fee(s) are submitte | ed for filing. | | | | |
| Please return a | all correspondence concerning this matter to the | he following: | | | | |
| | DAISY MCCLIN | | | | | |
| | (Name | e of Person) | | | | |
| | DAISY'S EMBROIDERY AND CRAFTS | , LLC | | | | |
| | | | | | | |
| | 2023 OCT -2 | _ | | | | |
| | | | | | | |
| | KISSIMMEE, FL 34741 | | -2 AHA | د بستند . ا | | |
| | (City/State | e and Zip Code) | 23 OCT - 2 AH 10: 04 | | | |
| For further info | ormation concerning this matter, please call: | | PE 9 | | | |
| DAIS | SY MCCLIN | 407 4559387 at () | | | | |
| | (Name of Person) | (Area Code & Daytime Telephone N | Number) | | | |
| Enclosed is a ch | eck for the following amount: | | | | | |
| ■ \$25.00 | 9 Filing Fee and Certificate of Dissolution | ☐ \$55.00 Filing Fee, Certificate of Dissolut Certified Copy (additional copy is encl | | | | |
| | ng Address: stration Section | Street Address: Registration Section | | | | |
| Divis | sion of Corporations | Division of Corporations | | | | |

The Centre of Tallahassee

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liabil DAISY'S EMBROIDERY AS | | | | | <u></u> . | | |
|------------|--|--|-----------------------|--------------------|--------------|---|--|--|
| 2. | The Articles of Organization | n were filed on FEBRUAR | XY 24,2022 | and assigne | ed | | | |
| | document number L220000 | | - | | | | | |
| 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 limited copy 605,0707 on back co | d liability company'. | s dissolution purs | suant to see | ction | | |
| | HAD NOT BEEN CONDUCT | • • | • | BEEN INACTIVE | E ALL YEA | \R | | |
| | | | | | 702 | 3 3 3 1 | | |
| | | | | |) OC | | | |
| • | | | | | SVIII | - I | | |
| 5. | If there are no members, en activities and affairs: | ter the name and address of DAISY MCCLIN | of the person appoint | ed to wind up the | company | ₹ 6: 2: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: | | |
| | | 2799 MONTICELLO WA | Y | | | _ | | |
| | | KISSIMMEE, FL 34741 | | | | | | |
| 6. ab | Signature of an authorized pove to wind up the company | person or if there are no me 's activities and affairs: | embers, the signature | e of the person ap | opointed ar | — nd listed | | |
| <u>\</u> \ | any block | Zer . | DAISY MCCLIN | | | | | |
| | U Signature | | Prir | nted Name | | _ | | |

FILING FEE: \$25.00