

L22000 478 117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

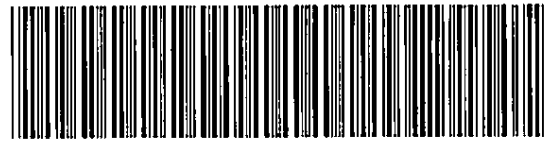
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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03/20/23--01013--025 \*\*25.00

FILED

2023 MAR 20 PM 2:51

SECRETARY OF STATE  
TALLAHASSEE, FL 32399

A. RIVERS

MAY 19 2023

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Happy Tails Petcare South Florida  
\_\_\_\_\_  
(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:

Sanjana K Gonsalvez

\_\_\_\_\_  
(Name of Person)

Happy Tails Petcare South Florida

\_\_\_\_\_  
(Firm/Company)

400 SW 1st Ave, Apt 706

\_\_\_\_\_  
(Address)

Fort Lauderdale, FL 33301

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sanjana Gonsalvez

\_\_\_\_\_  
(Name of Person)

508

3736981

at (\_\_\_\_\_) \_\_\_\_\_

(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:**

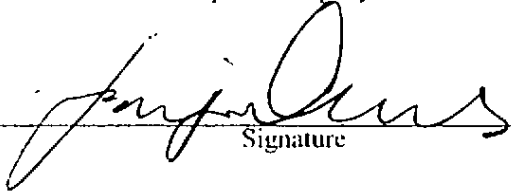
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is  
HAPPY TAILS PETCARE SOUTH FLORIDA
2. The Articles of Organization were filed on 11/07/2022 and assigned  
document number L22000478117
3. The delayed effective date the dissolution if not effective on the date of filing: 01/01/2023  
(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).  
Unable to sustain financially

5. If there are no members, enter the name and address of the person appointed to wind up the company  
activities and affairs: Sanjana Gonsalvez  
400 SW 1st Ave, Apt 706  
Fort Lauderdale, FL, 33301

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

Sanjana Gonsalvez

Printed Name

**FILING FEE: \$25.00**

2023 MAR 20 PM 2:51  
SECRETARY OF STATE  
1211 N. W. 1st Ave.  
FORT LAUDERDALE, FL 33301

FILED

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: L22000478117

Document number of Limited Liability Company is: L22000478117

Date of dissolution was: 01/01/2023

Description of information that must be included in a written claim:

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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

400 SW 1st Ave, Apt 706

Fort Lauderdale, FL, 33301

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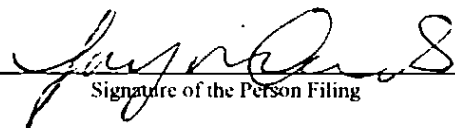
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A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Sanjana Gonsalvez

Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**