

LOS 0000 99519

Florida Department of State
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To: Division of Corporations
 Fax Number : (850) 617-6383

From: Account Name : TRUST PAY CORPORATION
 Account Number : I20140000092
 Phone : (786) 520-6788
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LLC DISSOLUTION OR WITHDRAWAL
UNOOCHO LLC

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MAY 21 2016
J SHIVERS

ARTICLES OF DISSOLUTION
FOR
UNOOCHO LLC
(A Florida Limited Liability Company)

FIRST: The name of a Limited Liability Company is: **UNOOCHO LLC**

SECOND: The Articles of Organization were filed on **10/10/2005** and assigned document number **L05000099519**.

THIRD: The effective date of the dissolution: **05/18/2016**.

FOURTH: A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes.
This Limited Liability Company ceased conducted its business.

FIFTH:

Dated: **May 18, 2016**

Signature _____
(By a member or authorized representative of a member)
REINALDO CREPALDI KLEPACZ
MANAGER

SECRETARY OF STATE
FALL WASSILLI, FLORIDA
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