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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

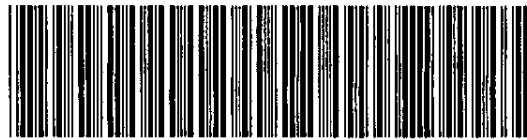
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

NOV 19 2014

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MANNY DO ALL, 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:

MANUEL DE LA MORENA
(Name of Person)

MANNY DO ALL, LLC
(Firm/Company)

6619 SOUTH DIXIE HWY. #105
(Address)

MIAMI, FLORIDA 33143
(City/State and Zip Code)

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For further information concerning this matter, please call:

MANUEL DE LA MORENA at 305 582-3625
(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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of a limited liability company is
MANNY DO ALL, LLC.

2. The Articles of Organization were filed on NOV. 7, 2007 and assigned
document number L07000113127

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)

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).

COMPANY NEVER USED .

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TALLAHASSEE FLORIDA

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: MANUEL DE LA MORENA
6619 SOUTH DIXIE HWY. #103
MIAMI, FL. 33143

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

MANUEL DE LA MORENA
Printed Name

FILING FEE: \$25.00