

L10000034583

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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09/19/16--01011--003 \*\*25.00

16 SEP 19  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

*9/19/16*

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Wiscordia 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:

Jason Zielinski, Esq.

(Name of Person)

Zielinski & Associates, PA

(Firm/Company)

800 E. Broward Blvd. Suite 702

(Address)

Fort Lauderdale, FL 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

Jason Zielinski Esq.

(Name of Person)

at ( 954 ) 524-6131

(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  
Wiscorida LLC

2. The Articles of Organization were filed on 03-29-2010 and assigned  
document number L10000034583

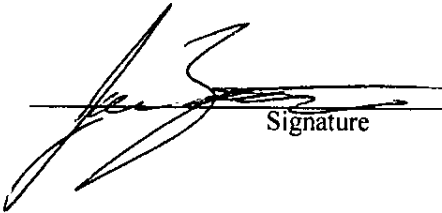
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  
ceased operations

16 SEP 19 11:30 AM  
STATE OF FLORIDA  
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:  
Jason Zielinski, Esq. 800 E Broward Blvd Suite 702 Ft 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

Jason Zielinski  
Printed Name

**FILING FEE: \$25.00**

## 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: WISCORDIA LLC

Document number of Limited Liability Company is: L10000034583

Date of dissolution was: 09-22-2016

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

Name of Creditor, good or service credited, date of receipt by Wiscordia LLC, amount of credit outstanding, breakdown of interest or penalties assessed

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

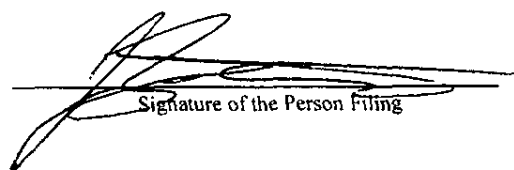
16 SEP 19 11:11 AM  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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

800 E Broward Blvd Suite 702  
Fort Lauderdale, FL 33301  
\_\_\_\_\_  
\_\_\_\_\_

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.

Jason Zielinski  
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**