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(Address)						
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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	CURIOSIDADES LLC			
SOBJE	(Name of Limited L	iability Compa	ny)	
The en	nclosed Articles of Dissolution and fee(s) are submitted for	or filing.		
Please	return all correspondence concerning this matter to the f	ollowing:		
	LIZBELIA BARBOZA			
	(Name of	Person)		****
				~~1 ~~ >
	(Firm/Co	mpany)		SECI VELLI
	10760 NW 82ND TER # 6		2014 SEP -8 FM 1: 33	
	(Addı	ess)		332 0 A 8 0 A 8
	DORAL, FL, 33178			F SIM
	(City/State an	d Zip Code)		22 33 35 35 35 35 35 35 35 35 35 35 35 35
For fur	rther information concerning this matter, please call:			•
	LIZBELIA BARBOZA	786	3559342	
	(Name of Person)		ode & Daytime Telepho	ne Number)
Enclose	ed is a check for the following amount:			
ς.	\$25.00 Filing Fee and Certificate of Dissolution		ng Fee, Certificate of Dis Copy (additional copy is	
	MAILING ADDRESS: Registration Section		EET/COURIER stration Section	ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 liabil CURIOSIDADES LLC	ity company is			· .	
2.	The Articles of Organization	n were filed on 03/	06/2014	and a	assigned	
	document number L14000	038600	·			
3.	The delayed effective date t	he dissolution if no date cannot be prior to	t effective on the d or more than 90 days la	ate of filing:	nt is received	l for filing)
4.	A description of occurrence 605.0707, Florida Statutes, (THE BUSSINESS OR S				ion pursua	nt to section
	THE BUSSINESS OR S	TORE WAS SC	DED, LOVY INCO			··········
					₩o	201
					ECRET	1959
					ARY U SSEE	-8
5.	If there are no members, en	ter the name and ad	dress of the person	appointed to win-	d up the co	ompany's
	activities and affairs:	LIZBELIA BAR	BOZA		三	ယ္ထ
		10760 NW 82N	ID TER UNIT 6	DORAL FL 33	178	
						
6. Iis	Signature of an authorized patted above to wind up the cor	person or if there ar npany's activities a	e no members, the nd affairs:	signature of the p	erson appo	ointed and
	Spoke hors	7e (<u> </u>	20E1 14 =	BAI	60ZA
٠	Signature	U \		Printed Name	t	

FILING FEE: \$25.00