L20000026676

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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12/26/19--01009--012 **25.00

2019 DEC 26 PM 5:14

R. WHITE

JAN 07 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FUERTE EMPLOYMENT AGENCY., 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:

ALBA VALERIA DOS SANTOS
(Name of Person)

FUERTE EMPLOYMENT AGENCY., LLC
(Firm/Company)

13428 COLONY SQUARE DRIVE APT 2123
(Address)

ORLANDO, FLORIDA 32837
(City/State and Zip Code)

For further information concerning this matter, please call:

ALBA VALERIA DOS SANTOS at (407) 7321372
(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 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

2019 DEC 26 PM 5:14

1. The name of a limited liability company is
FUERTE EMPLOYMENT AGENCY., LLC

2. The Articles of Organization were filed on 12/05/2019 and assigned

document number _____

3. The delayed effective date the dissolution if not effective on the date of filing: 12/19/2019
(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).
THE PRESIDENT HAVE TO BACK TO HER COUNTRY

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THE PRESIDENT HAVE TO BACK TO HER COUNTRY

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: AUDREY CIBELE FERNANDES

13428 COLONY SQUARE DRIVE APT 2123

ORLANDO, FLORIDA 32837

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

ALBA VALERIA DOS SANTOS
Printed Name

FILING FEE: $25.00