L11 000137472

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(Address)

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers OCT 20 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Law offices of Alessandra M. Bianchini, P.L.
(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:

Alessandra Bianchini
(Name of Person)
Law offices of
Alessandra M. Bianchini, P.L.
(Firm/Company)
1450 SW 10th St., suite 8
(Address)
Delray Beach, FL 33444
(City/State and Zip Code)

For further information concerning this matter, please call:

Alessandra Bianchini at (561) 644-2094
(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 Law offices of Alessandra M. Bianchini, P.L.

2. The Articles of Organization were filed on 10/4/2011 and assigned document number 45-3528578

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).

lack of business / clients

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

14 OCT 15 AM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Alessandra Bianchini
Printed Name

FILING FEE: $25.00