11700015604

(Requestor's Name)						
(Address)						
(Address)						
(Ci	ty/State/Zip/Phone	- #N				
(ty/Otate/Zip/i floii	⊆ π)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



800298057468

05/05/17--01009--022 **25.00

17 MAY -5 PH 2: 25
SECRETARY OF STATE
ONLY ANASSES FLORING

S Warren MAY - 8 2017

COVER LETTER

TO:

Registration Section
Division of Corporations

GREEN WASABI 1193 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:

CHANGDI HE

(Name of Person)

GREEN WASABI 1193 LLC

(Firm/Company)

5403 8TH AVE 2FL

(Address)

BROOKLYN, NY 11220

(City/State and Zip Code)

For further information concerning this matter, please call:

CHANGDI HE

₄₁850 \ 651-888

(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 GREEN WASABI 1193 LLC					
2.	The Articles of Organization	on were filed on 01/19	/2017	and assigned		
	document number L170000	15604				
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 listed as the document's effective date on the Department of State's records.					
4.	A description of occurrence 605.0707, Florida Statutes,	e that resulted in the li (copy 605.0707 on ba	imited liability comp ck cover letter).	any's dissolution pursuant to section		
	BUSINESS WAS CLOSED					
5.	If there are no members, en activities and affairs:	enter the name and address of the person appointed to wind up the company's CHANGDI HE				
		1193 N EGLIN PKW	/Y			
		SHALIMAR, FL 325	579			
6. lis	Signature of an authorized patted above to wind up the con	person or if there are n npany's activities and	no members, the sign affairs:	nature of the person appointed and		
	He, Chang Di' Signature		CHANGDI HE			
	Signature			Printed Name		

FILING FEE: \$25.00

FILED

17 MAY -5 PM 2: 25
SECRETARY OF STATE
SECRETARIASSEF FLORID.