

Division of Corporations

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A01000001147

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Debbie Thacker
Account Name : FOWLER, WHITE 2
Account Number : I19990000148
Phone : (813) 228-7411
Fax Number : (813) 228-9401

*File # 101-5595***DISS/TERM/CANCEL/REV OF LP/LLP****ROINA C. ARIAS ENTERPRISES, LTD.**

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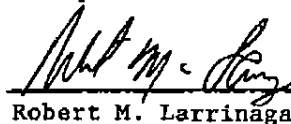
**CERTIFICATE OF DISSOLUTION
FOR****ROINA C. ARIAS ENTERPRISES, LTD.**

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on August 28, 2001, assigned Florida document number A01000001147, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)complete liquidation of partnership**SECOND:** ☐ A Notice of Dissolution is attached.
(Check box if attached.)**THIRD:** Effective date, if other than the date of filing: _____*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:


Rosario A. Larrinaga
Robert M. Larrinaga

Filing Fee: \$52.50
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TALLAHASSEE, FLORIDA

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