

L010000018407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

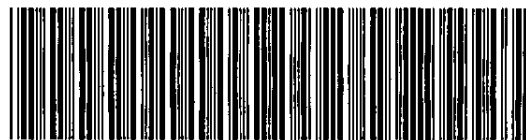
(Document Number)

Certified Copies _____

Certificates of Status ☒

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Office Use Only



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01/20/15--01030--020 **25.00

FILED
15 JAN 20 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB - 2 2015

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAFE DON JOSE 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:

Gloria F. Ruiz

(Name of Person)

CAFE DON JOSE LLC

(Firm/Company)

9922 DAVIS RD

(Address)

TAMPA FL 33637

(City/State and Zip Code)

For further information concerning this matter, please call:

Julio Ruiz

(Name of Person)

at (813) 985 7083

(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

FILED
15 JAN 20 PM 2:45
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

CAFE'DON JOSIE, LLC.

2. The Articles of Organization were filed on 10-24-2001 and assigned

document number L01000018407

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).

BUSINESS SOLD

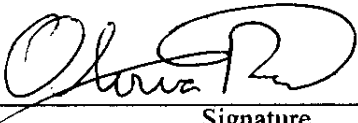
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

GLORIA RUIZ

9922 Davis Rd

Tampa, FL 33637

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

GLORIA RUIZ

Printed Name

FILING FEE: \$25.00