# L02000002107

(	Requestor's Name)			
(Address)				
	Address)			
(	City/State/Zip/Phone #)	)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				

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04/18/16--01016--017 \*\*25.00



APR 19 2016 J SHIVERS

## **COVER LETTER**

TO: Registration Section
Division of Corporations

GEMA 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:

ARIEL KANTOR				
(Name of Person)				
(Firm/Company)				
780 NE 69 ST #1408				
(Address)				
MIAMI, FL 33138				
(City/State and Zip Code)				

For further information concerning this matter, please call:

**ARIEL KANTOR** 

,,786 \ 302-

(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 liabilit GEMA LLC	y company is	·			
2.	The Articles of Organization	were filed on Jan 29,2002	and assigned			
	document number L02000002	2107				
3.	Note: If the date inserted in th	the dissolution if not effective on the date of filing: 12/31/2015 we date cannot be prior to or more than 90 days later than date document is received for filing) this block does not meet the applicable statutory filing requirements, this date will not be ective date on the Department of State's records.				
4.	605.0707, Florida Statutes, (c	opy 605.0707 on back cover letter).	ompany's dissolution pursuant to section			
	I opened a new business in a dif	terent field with a partner				
	New business: Delled Inc.					
			16 1800 110 1800 1800			
			APR I			
	If there are no members, enter activities and affairs:	or the name and address of the person ARIEL KANTOR	appointed to wind up the company's			
		780 NE 69 ST #1408	P. 37.			
		MIAMI, FL 33138				
6. lis	Signature of an authorized posted above to wind up the com	erson or if there are no members, the pany's activities and affairs:	signature of the person appointed and			
CAY		ARIEL KA	NTOR			
	Signature		Printed Name			
		FILING FEE: \$25.00				