

L02000025105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

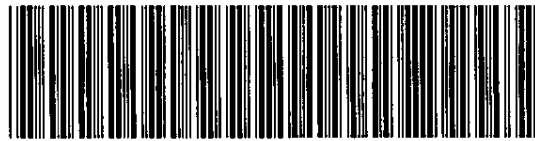
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2014 MAR 14 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Cuffigan MAR 19 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HECTARE, L.L.C.
(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:

Alan E. Krinzman
(Name of Person)

(Firm/Company)

8930 SW 115 Terrace
(Address)

Miami, FL 33176
(City/State and Zip Code)

For further information concerning this matter, please call:

Alan E. Krinzman at 305 567-5576
(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

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2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
HECTARE, L.L.C.

2. The Articles of Organization were filed on 09/25/2002 and assigned
document number L02000025105

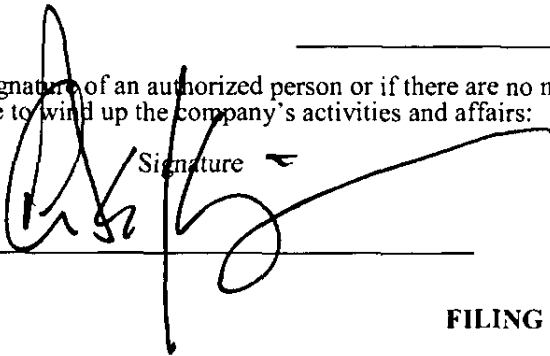
3. The delayed effective date the dissolution if not effective on the date of filing: _____

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).

The Company is no longer conducting business.

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

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

Printed Name

Alan E. Krinzman

FILING FEE: \$25.00