

L03000000422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

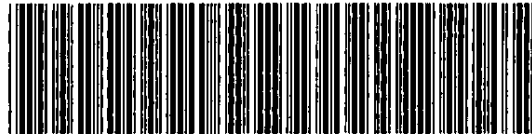
Special Instructions to Filing Officer:

**A. LUNT**

MAY 28 2010

**EXAMINER**

Office Use Only



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04/22/10 -01015--002 \*\*35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 MAY 27 AM 10:21

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 29, 2010

JAVIER DALMAU  
2100 PONCE DE LEON BLVD. STE 700  
CORAL GABLES, FL 33134

SUBJECT: MIXA, LLC  
Ref. Number: L03000000422

We have received your document for MIXA, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 010A00010659

**COVER LETTER**

**TÓ:** Amendment Section  
Division of Corporations

**SUBJECT:** REQUEST FOR DISSOLUTION OF CORPORATION

**DOCUMENT NUMBER:** L03000000422

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JAVIER DALMAU

(Name of Contact Person)

MIXA, LLC

(Firm/Company)

2100 PONCE DE LEON BLVD, STE. 700

(Address)

CORAL GABLES, FLORIDA 33134

(City/State and Zip Code)

2010 MAY 27 AM 10:21  
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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

JAVIER DALMAU/PATRICIA-ASST.

(Name of Contact Person)

at ( 305 ) 529.5004

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment 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

MIYA, LLC.

2. The Articles of Organization were filed on 01/06/2003 and assigned document number

LD3000000422

3. The date the dissolution was approved: 5/6/2010

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

Closed

**5. CHECK ONE:**

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

**7. CHECK ONE:**

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name



Javier Dalman