

L030000028957

(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:

Office Use Only



500267721815

12/30/14--01027--020 **25.00

FILED
2014 DEC 30 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W. G. Giffen

IAN 1 2 9615

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Best One Financial & Investment Services 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:

Luis Rosales

(Name of Person)

Executive Tax Service

(Firm/Company)

5931 Nw 173 Drive Ste 9

(Address)

Miami, FL 33015

(City/State and Zip Code)

For further information concerning this matter, please call:

Luis Rosales

(Name of Person)

954

243-6742

at ()

(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

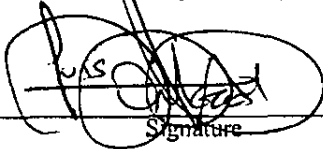
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2014 DEC 30 AM 11:00

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
BEST ONE FINANCIAL & INVESTMENT SERVICES LLC
2. The Articles of Organization were filed on 08/06/2003 and assigned
document number L03000028957
3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2014
(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).
By unanimous agreement, all members consent to the dissolution
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

Luis Ortega

Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Best One Financial & Investment Services LLC

Document number of Limited Liability Company is: L03000028957

Date of dissolution was: 12/31/2014

Description of information that must be included in a written claim:

Nature of Claim with amount along with name, address, and telephone number.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

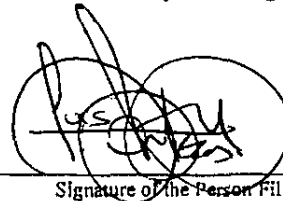
9425 SUNSET DR 170

MIAMI, FL 33173

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Luis Ortega

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

FILED
2014 DEC 30 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA