## 103000045872

(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
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S. YOUNG

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## **COVER LETTER**

	tion Section of Corporations		
SUBJECT:	Hawaiian Moose (Name of Limite	LLC ed Liability Company)	
	cles of Dissolution and fee(s) are submitted or concerning this matter to the concerning this matter than the concerning th		
-	Roy Sakan		
-	Sakamoto (		를 23
-	S095 NOPING	Naw St. Scite 203 Address)	SEP 19
-	Lanana, Hy (City/Stat	e and Zip Code)	PA Hi Co
For further inform	nation concerning this matter, please call:		
Jan	(Name of Person)	at ( 808 ) 669.0070 (Area Code & Daytime Telephone Number)	
Enclosed is a check	for the following amount:		
\$25.00 Fi	ling Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
	MAILING ADDRESS: Registration Section	STREET/COURIER ADDRES Registration Section	SS:

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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 liability  HAWAIIAN Moos	
	ere filed on November 17, 2003 and assigned
document number L030	00045872
(effective date <b>Note:</b> If the date inserted in this	dissolution if not effective on the date of filing:  cannot be prior to or more than 90 days later than date document is received for filing)  block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records.
605.0707, Florida Statutes, (cop	t resulted in the limited liability company's dissolution pursuant to section y 605.0707 on back cover letter).  SET IN FLORIDA CAPARTMENT
BUILDING IN	570
	DRADEN TON
5. If there are no members, enter tactivities and affairs:	ne name and address of the person appointed to wind up the company's SAKAM070
_	P.O. Box 10068
_	LAHAINA, HI 96761
6. Signature of an authorized pers listed above to wind up the compa	on or if there are no members, the signature of the person appointed and ny's activities and affairs:
Ra Saleamoto	BOY SAKAMOTO
Signature	Printed Name

**FILING FEE: \$25.00** 

## **COVER LETTER**

_	tration Section ion of Corporations		
SUBJECT: _	HAWAIIAN MO	OSE LLC	
DOCUMENT	г number: <i>L03</i> 00	00045872	
The enclosed I	Notice of Limited Liability	Company Dissolution	on and fee are submitted for filing.
Please return a	all correspondence concerning	g this matter to the fo	llowing:
Roy	SAKAMOTO		<b></b>
	(Name of	Contact Person)	16 SEP 19 PM 4: 06
	(Firr	n/Company)	<b>9</b> 9
P. o	. Box 10068		五
	(A	ddress)	0€
LAT	HAINA, HI 967	61	
	(City/Sta	te and Zip Code)	
	formation concerning this ma	· •	
Roy	SAKAMO70 ume of Contact Person)	at ( 808) (Area Code)	669-0070 (Daytime Telephone Number)
	check for the following amou		
\$\$25 Filing F	Fee □ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee of Certified Copy (Additional copy is en	& \$60 Filing Fee, Certificate of Status & closed) Certified Copy (Additional copy is enclosed)
Ameno Division P.O. E	ING ADDRESS: dment Section on of Corporations Box 6327 nassee, FL 32314	7 1 0 2	TREET ADDRESS: Amendment Section Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, FL 32301