

LO40000 71148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

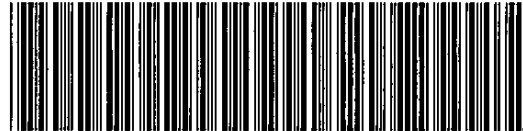
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JAN - 7 PM 2:52

T. Hampton JAN - 7 2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAS LLAVES, 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:

DANIEL C. BETZ

(Name of Person)

(Firm/Company)

P.O. BOX 771389

(Address)

NAPLES, FL 34107

(City/State and Zip Code)

For further information concerning this matter, please call:

DANIEL C. BETZ

(Name of Person)

at (239) 398-1014

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



30.00 Filing Fee &
Certificate of Status



\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$60.00 Filing Fee,
Certificate of Status &
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 6, 2007

DANIEL C BETZ
P O BOX 771389
NAPLES, FL 34107

SUBJECT: LAS LLAVES, LLC
Ref. Number: L04000071148

RECEIVED
08 JAN -7 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for LAS LLAVES, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 007A00068904

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JAN -7 PH 2: 52

1. The name of a limited liability company is

LAS LLAVES, LLC

2. The Articles of Organization were filed on 9/28/04 and assigned document number
L04000071148

3. The date the dissolution was approved: 1/1/07

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).

WRITTEN CONSENT OF ALL MEMBERS OF THE LLC.

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.

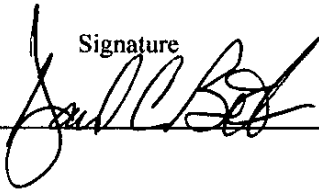
6. All remaining property and assets have been distributed among its members in accordance with their respective
rights and interests.

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

DANIEL C. BETZ

FILING FEE: \$25.00