## L04000074721

(Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(//u	uicss)	
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
	,	
(Business Entity Name)		
(Do	cument Number)	<del></del>
Certified Copies	Certificates	of Status
Certified Copies	Certificates	or otatus
Special Instructions to	Filing Officer:	
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Office Use Only



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ZECRETARY OF STATE

C. LEWIS MAR 1 7 2009 EXAMINER

## **COVER LETTER**

Registration Section

TO:

Division of Corporations		
SUBJECT: HA Castro & Associates,	LLC	
<del></del>	mited Liability Company)	
The enclosed Articles of Dissolution and fee(s) are sub	omitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
Hector Castro		
(	Name of Person)	
(Firm/Company)		
215 Cypress Way East, Unit D-12		
	(Address)	
Naples, FL 34110		
(City	/State and Zip Code)	
For further information concerning this matter, please call:		
Hector Castro	at ( 305 ) 546-4915	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certifieate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS:	STREET/COURIER ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2009 MAR 16 PM 2: 58

SUPPLIFIARY OF STATE

The name of a limited liability company is     HA Castro & Associates, LLC	TALLAHASSEE, FLORIDA
2. The Articles of Organization were filed on L0400074721	and assigned document number
3. The date the dissolution was approved: December	er 31, 2008
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back coverage The limited liability company has no	d liability company's dissolution pursuant to section er letter).
business.	
5. CHECK ONE:	
	nited liability company have been paid or discharged.
OR- Adequate provision has been made for the de	bts, obligations and liabilities pursuant to s. 608.4421.
<ol><li>All remaining property and assets have been distribute rights and interests.</li></ol>	ed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the compa	ny in any court.
-OR- Adequate provision has been made for the sage entered against it in any pending suit.	tisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of n	nembership interests necessary to approve the dissolution:
Signature	Printed Name
	Hector Castro