L04000076236

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAI	L			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	_			
Special Instructions to Filing Officer:				



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COVER LETTER

TO: Registration Section Division of Corporations

POLYNATURALES Distributing L.L.C. (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:

Polynaturales Distributing LLC
(Firm/Company) 9835 S.W. 77 PLACE (Address) MIAMI, FL. 33156

For further information concerning this matter, please call:

WILLIAM BENARD

at (<u>305</u>) <u>412-9623</u> (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



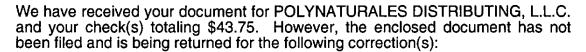
FLORIDA DEPARTMENT OF STATE Division of Corporations

January 23, 2015

WILLIAM P BENARD POLYNATURALES DISTRIBUTING, L.L.C. 9835 SW 77 PL MIAMI, FL 33156

SUBJECT: POLYNATURALES DISTRIBUTING, L.L.C.

Ref. Number: L04000076236



The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6051.

Teresa Brown Regulatory Specialist II

Letter Number: 315A00001426

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPA	冷 火 (
he name of a limited liabil POLYNATU	ity company is RALES DISTRIBUT	ING, L.L.C.
•	n were filed on10 /20 / 200	4 and assigned
ocument number <u>LO4</u>	000076236	
he delayed effective date the deflective	ne dissolution if not effective on the date date cannot be prior to or more than 90 days later	of filing:
description of occurrence 5.0707, Florida Statutes, (INACTIVITY	that resulted in the limited liability comp copy 605.0707 on back cover letter).	
there are no members, ent	er the name and address of the person ap William P. BEN	•
	9835 S.W. 77	PLACE
	MIAMI, FL.	33156
gnature of an authorized p above to wind up the con	erson or if there are no members, the sign	nature of the person appointed an

FILING FEE: \$25.00

Printed Name

Signature