LD5000017236

(Requestor's Name)		
(Address)		
(Address)		
(Cil	ty/State/Zip/Phone	9#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		of Status
Special Instructions to Filing Officer:		
	(B/A





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SECRETARY OF STATE DIVISION OF CORPORATIONS



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: L05000017236	
(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:	
CARLOS ESTRADA	
(Name of Person)	
DEC INVESTMENTS, LLC	
(Firm/Company)	
620 WEST 70TH PLACE	
(Address)	
HIALEAH, FLORIDA 33014	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
CARLOS ESTRADA at (305) 825-4658	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certified Copy S60.00 Filing Fee,	

(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

(additional copy is enclosed)

Certified Copy

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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5 and assigned document number
<u> </u>
liability company's dissolution pursuant to section r letter). JSINESS
ted liability company have been paid or discharged. ts, obligations and liabilities pursuant to s. 608.4421. I among its members in accordance with their respective
a among its momoers in accordance with their respective
y in any court.
sfaction of any judgment, order or decree which may be
embership interests necessary to approve the dissolution:
Printed Name
CARLOS ESTRADA
ESPERANZA ESTRADA
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