L05000028628

(Requestor's Name)	
·	
(Address)	
W-W-W-	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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J. BRYAN

MAR 2 6 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2008

HECTOR OLIVEROS
PUERTO OFFICE IMP&DIST LLC
6600 PONDAPPLE ROAD
BOCA RATON, FL 33433

SUBJECT: PUERTO OFFICE IMP&DIST LLC

Ref. Number: L05000028628

SECRETARY OF STATIONS
CIVISION OF CORPORATIONS
ON HAR 25 PM 4: 23

We have received your document for PUERTO OFFICE IMP&DIST LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 408A00015947



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: PUCATO OFFICE IMP e DIST 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:	
HECTOR OLIVER	
MECTOR OLIVEROS (Name of Person)	
PULLO DIFFICE IMP e DIST LIC	
6600 PONDAPPIR RO	e s
Boca RATON - FL 33433 (City/State and Zin Code)	ECRETAR SION OF C
(City/State and Zip Code)	의 작유 다
For further information concerning this matter, please call:	STATE
HECTOR OLIVERS (Name of Person) at (S61) 703-7582 (Area Code & Daytime Telephone Number)	NS.
Enclosed is a check for the following amount:	
\$25.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is VELTO DEFICE IMP	a dict (10
2. The Articles of Organization were filed on	2001 and assigned document number
 3. The date the dissolution was approved: 56/ 4. A description of occurrence that resulted in the lim 608.441, Florida Statutes, (copy 608.441 on back) 	ited liability company's dissolution pursuant to section over letter).
MARKET CONDITIONS / LO	SS OF MONEY AND CAPITAL
5. CHECK ONE:	
All debts, obligations and liabilities of the OR-Adequate provision has been made for the	limited liability company have been paid or discharged. debts, obligations and liabilities pursuant to s. 608.4421. outed among its members in accordance with their respective
There are no suits pending against the con OR- Adequate provision has been made for the entered against it in any pending suit.	npany in any court. satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of	f membership interests necessary to approve the dissolution:
Signature	Printed Name HESCIPE OLIVERUS