

105000032287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

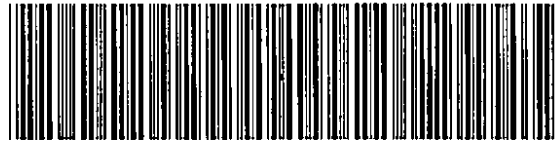
(Business Entity Name)

(Document Number)

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2018 SEP 13 PM 2:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

D PRUCE
SEP 13 2018

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SEP 18 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SONI REALTY FLORIDA 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:

ASHWIN SHAH

(Name of Person)

HOUSE OF SPICES (INDIA) INC

(Firm/Company)

3000 MARCUS AVE SUITE 2W10

(Address)

NEW HYDE PARK, NY 11042

(City/State and Zip Code)

For further information concerning this matter, please call:

ASHWIN SHAH

(Name of Person)

at (718) 507-4600

(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

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2010 SEP 13 PM 2:57

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

SONI REALTY FLORIDA LLC

2. The Articles of Organization were filed on 04/01/2005 and assigned

document number 05000032287

3. The delayed effective date the dissolution if not effective on the date of filing: 09/03/2018
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

NO MORE BUSINESS ACTIVITIES

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

NEIL G. SONI PRESIDENT 3000 MARCUS AVE, SUITE 2W10

NEW HYDE PARK, NY 11042

6. Signature of an authorized person or if there are no members, the signature of the person appointed listed above to wind up the company's activities and affairs:



Signature

NEIL SONI

Printed Name

FILING FEE: \$25.00

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2018 SEP 13 PM 2:07

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