## L05000079387

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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09 APR 24 PH 2: 19

SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

APR 2 7 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of C					٠	
SUBJECT: TRAI	DING & LOGISTIC 8	09, LLC				
	(Name of Li	mited Liabilit	y Company)	<u> </u>		
The enclosed Articles	of Dissolution and fee(s) are sub	mitted for fili	ng.			
Please return all corre	spondence concerning this matter	r to the follow	ing:			
MΔ	RISELA ARREAZA					
(Name of Person)						
(Firm/Company)						
5900 SW 56 TERRACE						
(Address)						
MIA	AMI FL 33143					
	(City	/State and Zip	Code)			
For further informatio	on concerning this matter, please	call:				
MARISE	ELA ARREAZA	at (	786	271-04	22	
	(Name of Person)		(Area Code	& Daytime Tel	ephone Number)	
Enclosed is a check for t	the following amount:					
\$25.00 Filing Fee	30.00 Filing Fee & Certificate of Status	Certifi	Filing Fee & ed Copy onal copy is e	nclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
\			~~~~			
	MAILING ADDRESS: Registration Section		STREET/COURIER ADDRESS: Registration Section			
Div		Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

09 APR 24 PM 2: 19

1. The name of a limited liability company is					
TRADING & LOGISTIC 809, LLC					
2. The Articles of Organization were filed on L05000079387	2005 and assigned document number				
3. The date the dissolution was approved: APRIL	10, 2009				
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).  THE WRITTEN CONSENT OF ALL OF THE MEMBERS OF THE LIMITED					
LIABILITY COMPANY.					
6 CHECK ONE.					
5. CHECK ONE:  All debts, obligations and liabilities of the liv	nited liability company have been paid or discharged.				
-OR-	ebts, obligations and liabilities pursuant to s. 608.4421.				
6. All remaining property and assets have been distribut rights and interests.	ed among its members in accordance with their respective				
7. CHECK ONE:					
There are no suits pending against the compa-OR-Adequate provision has been made for the sa entered against it in any pending suit.	any in any court. stisfaction of any judgment, order or decree which may be				
entered against te maily perioning sum					
gnatures of the members having the same percentage of i	nembership interests necessary to approve the dissolution				
Signature	Printed Name				
Mariela Ducas	MARISELA ARREAZA				
Gabriela Ramell-la	GABRIELA RAURELL GOMEZ				
A Lin	ZULAY CIFFONI				
NSM.	VINCENT GITTO				
and	JESUS ALFREDO ARREAZA				
	FRANTZ FRANCOIS				
FILING	FEE: \$25.00				