# 10000004439

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
189 4089 671			
Office Use Only  WH 39			



500147528155

03/27/09--01017--017 \*\*25.00

FILED

2009 APR 21 AH 8: 27

TALLAHASSEE, FLORIE,

M. THOMAS

APR 2 2 2009

EXAMINER

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: CEZFO, 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:		
Cesar Forero (Name of Person)		
. (Firm/Company)		
PO BOX 460		
(Address)		
HALLANDALE BEACH, FL 33008	<del></del>	
(City/State and Zip Code)	2009 SE(	
For further information concerning this matter, please call:	2009 APR 21 SECRETARY	Fize
Cesar Forero at ( 305 ) 793-1207	Pi <b>≥</b>	ï
(Name of Person) (Area Code & Daytime Telephone Number	· (-)	(
Enclosed is a check for the following amount:	8: 27	
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	tatus &	

#### **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

March 30, 2009

CESAR FORERO PO BOX 460 HALLANDALE BEACH, FL 33008

SUBJECT: CEZFO, LLC Ref. Number: L06000004439

We have received your document for CEZFO, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

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 9 (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 309A00010553

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on 01/13/2 L06000004439	and assigned document numb
3. The date the dissolution was approved:O1	/2009
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back coverage).  1(c) - Written consent of all of the me	
5. CHECK ONE:	
-OR-	hited liability company have been paid or discharged. bts, obligations and liabilities pursuant to s. 608.4421.
<ol> <li>All remaining property and assets have been distribute rights and interests.</li> </ol>	ed among its members in accordance with their respective 2009
7. CHECK ONE:	ER 🦰
There are no suits pending against the compar-OR- Adequate provision has been made for the sati entered against it in any pending suit.	tisfaction of any judgment, order or decree which may be
Signature	Printed Name
	CÉSAR FORLRO.
	<u></u>