

LD6000044260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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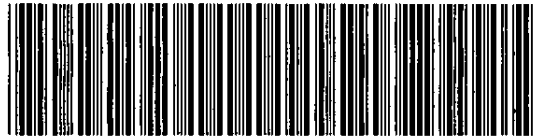
Special Instructions to Filing Officer:

**L. SELLERS**

OCT 27 2008

**EXAMINER**

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10/10/08--01027--012 \*\*35.00

FILED  
08 OCT 27 AM 8:49  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Saidi Cuccia Financial, 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:

Chris Cuccia  
(Name of Person)  
Saidi Cuccia Financial, LLC  
(Firm/Company)  
4830 W. Kennedy Blvd. #885  
(Address)  
Tampa, FL 33609  
(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Cuccia at 813 637-6373  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 17, 2008

CHRIS CUCCIA  
4830 W. KENNEDY BLVD., #885  
TAMPA, FL 33609

SUBJECT: SAIDI CUCCIA FINANCIAL, LLC  
Ref. Number: L06000044260

We have received your document for SAIDI CUCCIA FINANCIAL, 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):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 808A00054149

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

08 OCT 27 AM 8:49

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1. The name of a limited liability company is

Saidi Cuccia Financial, LLC

2. The Articles of Organization were filed on 4/28/2006 and assigned document number

LO6000044260

3. The date the dissolution was approved: 10/7/08

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).

LLC not necessary anymore

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Chris Cuccia

Printed Name

Chris Cuccia