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(Re	questor's Name)	
(Ad	dress)	-
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(Cit	y/State/Zip/Phone	**
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
ı		,
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE

COVER LETTER

Division of Corporations		
SUBJECT: A + E CONSUL	Iting UC	
	imited Liability Company)	
The enclosed Articles of Dissolution and fee(s) are sub-	bmitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
TOMANTI OLIADANI	•	
ESMAIEL SHABAN	(Name of Person)	
	·	
A & E CONSULTING		E LECTRICS
	(Firm/Company) AHASS AHASS	
1521 ALTON ROAD		
	(Address)	M
MIAMI BEACH, FL	33139 FF STATE 34 State and Zip Code) 50.5	Sura A
(City	y/State and Zip Code)	
For further information concerning this matter, please	call:	
ESMAEIL SHABANI	at (305) 986-8084	
(Name of Person)	(Area Code & Daytime Telephone Number)	
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 (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed))
MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	

Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2. The Articles of Organization were filed on 08	/14/2006	and assigned doc	ument n	umber
L06000079859				
3. The date the dissolution was approved: APR	IL 27, 2007	<u></u> .		
4. A description of occurrence that resulted in the 1 608.441, Florida Statutes, (copy 608.441 on bac NO ACTIVITY FOR THIS CO	limited liability company's d k cover letter).			
			CR	Edby
		AS	ĬĄ.	ACTUAL DESIGNATION OF THE PERSON OF THE PERS
		Ĺ. Ļ.	-< <u>C</u>	
5. CHECK ONE:		FLO	S -	J 0
All debts, obligations and liabilities of t	he limited liability company	have been paid o	hscharge	d.
OR-Adequate provision has been made for the	the debts, obligations and lia	bilities pursuant to s	. 608.442	21.
All remaining property and assets have been dis rights and interests.	tributed among its members	in accordance with t	heir resp	ective
7. CHECK ONE:				
There are no suits pending against the c	ompany in any court.			
OR-Adequate provision has been made for the entered against it in any pending suit.	the satisfaction of any judgm	nent, order or decree	which m	ay be
Signatures of the members having the same percentag	e of membership interests ne	ecessary to approve t	he disso	lution:
Signature	Printed Name			
1 Spand	ESMAI	EIL SHABA	.NI	
• • • • • • • • • • • • • • • • • • • •				
				

FILING FEE: \$25.00