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SECRETARY OF STATE.
TALL AHASSEE, FLORIDA

D. BRUCE

FEB 2 0 2009

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: ASAPARTS 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:	
GUILLERMO ARNAL	
(Name of Person)	
ASAPARTS LLC	
(Firm/Company)	
7961 NW 68TH ST # 400	
(Address)	09 SEC ALL
DORAL FL 33166	FEB AHA
(City/State and Zip Code)	ARY SSE
For further information concerning this matter, please call:	PH 9: C
GUILLERMO ARNAL at (305) 3954634	DA TE ADA
(Name of Person) (Area Code & Daytime Telephone N	umber)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	Filing Fee, c of Status & Copy al copy is enclosed)
MAILING ADDRESS: STREET/COURIER AD	DRESS:

TO:

Registration Section

Registration Section Division of Corporations 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

1. The name of a limited liability company is ASAPARTS LLC		
2. The Articles of Organization were filed on L07000003074	/09/2007	and assigned document number
3. The date the dissolution was approved: 12/0	4/2008	·
4. A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on bacclosing Down Operations.	limited liability compan	y's dissolution pursuant to section 2008. OUT OF BUSINESS.
5. CHECK ONE:		
All debts, obligations and liabilities of OR- Adequate provision has been made for 6. All remaining property and assets have been di	the debts, obligations ar	nd liabilities pursuant to s. 608.4421.
rights and interests.	J	•
7. CHECK ONE: There are no suits pending against the	company in any court	
<u> </u>	• •	udgment, order or decree which may be
ignatures of the members having the same percenta	ge of membership intere	sts necessary to approve the dissolution:
Signature	•	Printed Name
(H)	GUIL	LERMO ARNAL
		09 FEB 19 PM 3: 04 SECRETARY OF STATE LLAHASSEE, FLORIDA
		TAR
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		TB 19 PH 3: 04 HASSEE, FLORIDA
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