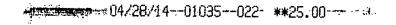
L0700000000467

(Requestor's Name)					
(Hoganous France)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Oct.induced of Status					
Special Instructions to Filing Officer:					

Office Use Only



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MAY - 5 2014 T CLINE

COVER LETTER

_	ion of Corporations					
SUBJECT:	Exemplo Services LLC					
(Name of Limited Liability Company)						
The enclosed A	Articles of Dissolution and fee(s) are submitte	ed for filing.				
	Il correspondence concerning this matter to the	_				
	Francisco Faria					
	(Name of Person)					
	- 500 2					
	1014 APR 28 SEORE (AR) ALLAHASS					
	- 53 53 53					
	سهدة غملا					
	(City/State	e and Zip Code)		PM 3: 34 OF SIALE E, FLORID		
For further info	ormation concerning this matter, please call:			31 34 31 34		
Fra	ncisco Faria	813	343-5680			
	(Name of Person)		ode & Daytime Telephone Nur	nber)		
Enclosed is a ch	eck for the following amount:					
✓ \$25.00	Filing Fee and Certificate of Dissolution		g Fee. Certificate of Dissolution opy (additional copy is enclosed)			
	MAILING ADDRESS:		EET/COURIER ADD	DRESS:		
	Registration Section Division of Corporations		Registration Section Division of Corporations			
	P.O. Box 6327		Clifton Building			
	Tallahassee, FL 32314	2661	2661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabil Exemplo Services LLC	ty company is			_·			
2.	The Articles of Organization	were filed on 02/22/20	007	and assigned				
	document number L07000	020467	-					
3.	The delayed effective date (ve date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing)						
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to sect 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).								
	No activity							
					1107			
		·		المراجع	70			
				かがい。	28			
5	If there are no members, ent	er the name and address of	of the person appointed	me me	R			
5. If there are no members, enter the name and address of the person appointed to wind activities and affairs: Francisco Faria		or to write up the company	္တဲ့ ယ့					
	activities and affairs:			<u> </u>	<u>ာ</u>			
11930 Royce Waterford Circle					_			
Tampa, FL 33626				_				
				······································	-			
6. Iis	Signature of an authorized p ted above to wind up the con	erson or if there are no mapany's activities and affa	embers, the signature or irs:	of the person appointed and	d			
	frum from		Francisco Faria		_			
V	Signature		Printe	ed Name	-			

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company:Exemplo Services LL	.c
Document number of Limited Liability Company is: L070000	20467
Date of dissolution was:	
Description of information that must be included in a written c	NARY CHARSEE
	7 T T T T T T T T T T T T T T T T T T T
Mailing address where claims can be sent: (Claims cannot be set Exemplo Services LLC	ent to the Division of Corporations)
720 Brooker Creek Blvd	
Suite 200	
Oldsmar, FL 34677	
A claim against the above named limited liability company wil claim is commenced within 4 years after the filing of this notice	
Francisco Faria	
Printed Name of the Person Filing	Signature of the Person Filing
<u>.</u>	

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00