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(Ad	ldress)	
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COVER LETTER

	egistration Section ivision of Corporations				
CHDIECT	SALDANA ENTERPRISES LLC				
SUBJECT:(Name of Limited Liability Company)					
	ed Articles of Dissolution and fee(s) are submitt	-			
Please retui	rn all correspondence concerning this matter to	the following:			
	FELIX A DIEZ , EA				
	(Nan	ne of Person)			
	DBS DIEZ BUSINESS SERVIC	CES INC			
	(Fire	m/Company)			
	4125 W WATERS AVENUE				
	(,	Address)			
	TAMPA, FL 33614				
	(City/Star	te and Zip Code)			
For further	information concerning this matter, please call:				
F	ELIX A DIEZ EA, CAA	813 871 1816			
	(Name of Person)	(Area Code & Daytime Telephone Number)	2014 /	cacqu	
Enclosed is a	a check for the following amount:	्री के की प्राथित के किया है कि की अंक्रिक की	APR	i)	
\$2	5.00 Filing Fee and Certificate of Dissolution	S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	25 PM I:		
	MAILING ADDRESS:	STREET/COURIER ADDRESS:	0+1		
	Registration Section	Registration Section	_		
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle			
		- Tallahassee, FL 32301			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is SALDANA ENTERPRISES LLC			
2.	The Articles of Organization	were filed on 03/16/2007 and assigned		
	document number <u>L07000</u>	028637		
3.	The delayed effective date the (effective of	ne dissolution if not effective on the date of filing: 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 section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). BUSINESS IS NO LONGER PROFITABLE 			
	200111200 10 110 2011	<u>JERT RO, III, DEE</u>		
5. If there are no members, enter the name and address of the person appointed to wind up the company				
	activities and affairs:	MANUEL F SALDANA		
		2922 WEST TAMPA BAY BLVD TAMPA FL 33607		
6. lis	Signature of an authorized p ted above to wind up the com	erson or if there are no members, the signature of the person applified and apany's activities and affairs:		
<u></u>	Win (MANUEL F SALDANA		
	Signature	Printed Name		
	7	FILING FEE: \$25.00		