07000035805

		t.
· (Re	equestor's Name)	
(Ad	ldress)	
(Ad	ddress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
,	,	•
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



400153105804

05/04/09--01017--003 **25.00

2009 MAY - 4 PH 3: 25

SECRETARY OF STATE
TALL AHASSEF FLORID.

M. THOMAS

MAY - 5 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 1514 CARAFE TOVESTMENTS, 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:
OIBALDO J. CAPOTE (Name of Person)
Z009 SEC
15414 PINE I REE DR. SSEED PR. SSEED PR. SSEED PR. SSEED PR. SEED PR. SSEED PR. SEED
City/State and Zip Code) (City/State and Zip Code)
For further information concerning this matter, please call:
OFRACO J. CAPOTE at (305) 588-9284 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\sum_{\text{S55.00 Filing Fee}} \text{\$\sum_{\text{S55.00 Filing Fee}} & \$\sum_{\text{S60.00 Filing Fee}} \text{\$\sum_{\text{S60.00 Filing Fee}} & \$\sum_{\text{Certificate of Status}} \text{\$\sum_{\text{Certified Copy}} \text{\$\text{Certified Copy} \text{\$\text{Certified Copy} \text{\$\text{(additional copy is enclosed)}} \text{\$\text{Certified Copy} \text{\$\text{(additional copy is enclosed)}} \text{\$\text{\$\text{Certified Copy} \text{\$\text{(additional copy is enclosed)}}} \text{\$\text{\$\text{\$\text{Certified Copy} \$\text{
MAILING ADDRESS: STREET/COURIER ADDRESS:

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 1514 CAPAFE	INVESTMENTS, LLC
2. The Articles of Organization were filed on	and assigned document number
3. The date the dissolution was approved:	vary 1, 2009.
4. A description of occurrence that resulted in the lim 608.44 h, Florida Statutes, (copy 608.441 on back of	nited liability company's dissolution pursuant to section cover letter).
UPON THE WRITTEN	COOSENT OF ALL OF THE
COMPANY.	E CIVITED LIABILITY
	7.009 TALE
5. CHECK ONE:	CRE T
☐-OR-	limited liability company have been paid or discharged. debts, obligations and liabilities pursuant to \$\frac{2}{2}\$ 608.4421.
All remaining property and assets have been distril rights and interests.	buted among its members in accordance with their respective
7. CHECK ONE:	DE S
There are no suits pending against the con-OR-Adequate provision has been made for the entered against it in any pending suit.	npany in any court. e satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of	of membership interests necessary to approve the dissolution:
Stenature	Printed Name Printed Name OFFICE OF