## 1000051195

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## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJI	
	(Name of Limited Liability Company)
The en	osed Articles of Dissolution and fee(s) are submitted for filing.
Please	turn all correspondence concerning this matter to the following:
	FLAVIO CRIOLLO
	(Name of Person)
	At CRI
	(Firm/Company)
	n
	1506 Huleig civole
	- (Add 635)
	Ovlando FL. 32824
	(City/State and Zip Code)
For fur	er information concerning this matter, please call:
	T auio Criollo at 914 815 7185  (Name of Person) (Area Code & Daytime Telephone Number)
	(Late coat to 2 symmo stophono stanous)
Enclose	is a check for the following amount:
\$25.0	Filing Fee 30.00 Filing Fee & \$55.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status &
	(additional copy is enclosed) Certified Copy (additional copy is enclosed) (additional copy is enclosed)
	(additional copy is enclosed)
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	MAILING ADDRESS: STREET/COURIER ADDRESS:
	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

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