L07000010874

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O9 APR 27 AM IO: 44
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: CARLOS J ZORRILLA CONSULTING 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:					
Jorge L Zorrilla (Name of Person)					
(Name of Person)					
CARLOS J ZOTVIlla CONSUlting LLC (Firm/Company)					
509 S. CHICK-ASAW TRAIL # 185 (Address)					
ORLANDO FL 32825 (City/State and Zip Code)					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
Joge Zorrila at (407) 625-3854					
(Name of Person) at (40) 625-3859 (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)					

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



April 9, 2009

CARLOS J. ZORRILLA CONSULTING LLC 509 S CHICKASAW TRAIL #185 ORLANDO, FL 32825

SUBJECT: CARLOS J ZORRILLA CONSULTING, LLC

Ref. Number: L07000070874

We have received your document for CARLOS J ZORRILLA CONSULTING, LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 009A00011969

Neysa Culligan Regulatory Specialist II

ARTICLES OF DISSOLUTION FOR' A LIMITED LIABILITY COMPANY APR 27 AM 10: 44

1. The name of a limited liability comp	•	TAL	CRETARY OF STATE LAHASSEE FLORID	Δ
2. The Articles of Organization were file	d on 07/09/	2007	_ and assigned docume	ent number
3. The date the dissolution was approved	: 04-02-	2009		
4. A description of occurrence that result 608.441, Florida Statutes, (copy 608.4	ed in the limited liabilit 41 on back cover letter	y company's dis	solution pursuant to se	ection
the PARTNEIS HAVE	AGREAD.	O DISSI	olue the	
PARTNERSHIP BELAN	SE OF LOW	deman	id of the	
BUSINESS				
5. CHECK ONE:				
All debts, obligations and liab	ilities of the limited lial	oility company h	ave been paid or disch	arged.
OR- Adequate provision has been	made for the debts, obli	gations and liabi	lities pursuant to s. 608	8.4421.
All remaining property and assets have rights and interests.	e been distributed amon	g its members in	accordance with their	respective
7. CHECK ONE:			•	
There are no suits pending aga	ainst the company in an	y court.		
OR- Adequate provision has been a entered against it in any pendi	made for the satisfaction	n of any judgmer	nt, order or decree which	ch may be
Signatures of the members having the same	percentage of members	hip interests nece	ssary to approve the d	issolution:
Signature			Printed Name	
J. W.	<u>-</u>	· JOR	ge Zonila	
	•			
			·	