

267000079253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

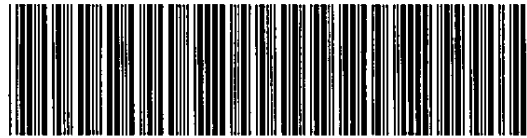
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900267384779

12/15/14--01045--021 \*\*25.00

FILED  
14 DEC 15 AM 9:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
J. Shivers DEC 18 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MEDUSA TEC 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:

ALFONSO MARTINEZ

(Name of Person)

(Firm/Company)

600 BRICKELL AVE, STE 2700

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

ALFONSO MARTINEZ

(Name of Person)

at ( 786 ) 201-3910

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

✓ \$25.00 Filing Fee and Certificate of Dissolution

— \$55.00 Filing Fee, Certificate of Dissolution &  
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

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

MEDUSA TEC LLC

2. The Articles of Organization were filed on 07/31/2007 and assigned

document number L07000078253

3. The delayed effective 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 section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

By the decision of all the members to dissolve the Company.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Alfonso Martinez

600 Brickell Ave, Ste 2700

Miami, FL 33131

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Signature

ALFONSO MARTINEZ

Printed Name

**FILING FEE: \$25.00**

FILED  
14 DEC 15 AM 9:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA