| 305   | , Division of | С. тро             | ation Division of Corporations<br>Blectronic Filing Cover Sheet   |
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|   |               |                    | : Please print this page and use it as a cover sheet. Type the fax audit ber (shown below) on the top and bottom of all pages of the document.  |
|   |               |                    | (((H11000200106 3)))  |
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|   |               | Note:              | DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.  |
|   |               |                    | To:<br>Division of Corporations<br>Fax Number : (850)617-6383<br>From:<br>Account Name : AVILA RODRIGUEZ HERNANDEZ CAMPARER<br>Account Number : 120070000136<br>Phone : (305)779-3564<br>Fax Number : (305)779-3561 |
| F.  |               | M                  | LLC DISSOLUTION OR WITHDRAWAL   STORMANN'S COFFEE OPERATIONS, LLC   Certificate of Status 0   Certified Copy 0   Page Count 02  |
| and the second se | RECEIVED      | DECKETARY OF STATE | Estimated Charge \$25.00<br>Filing Menu Corporate Filing Menu Help  |

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# FAX AUDIT NO. H11000200106 3

# **COVER LETTER**

TO: **Registration Section** Division of Corporations

SUBJECT: STORMANN'S COFFEE OPERATIONS, 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:

Ana M. Sanz, Paralegal

(Name of Person)

Avila Rodriguez Hernandez Mena & Ferri

(Firm/Company)

2525 Ponce de Leon Blvd., Suite 1225

(Address)

Coral Gables, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

| Ana M. Sanz      | <sub>at (</sub> 786 <u>, 594-4102</u>  |
|------------------|--|
| (Name of Person) | (Area Code & Daytime Telephone Number) |

(Name of Person)

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|----------|-----|---------|-----|--------|-----|
| Area Cod | e & | Daytime | Tel | ephone | Num |

Enclosed is a check for the following amount:

✓ \$25.00 Filing Fee

30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)

\$60.00 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** AUG -9 PH 12: **Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

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FAX AUDIT NO. H11000200106 3

# ARTICLES OF DISSOLUTION FOR STORMANN'S COFFEE OPERATIONS, LLC

Pursuant to Section 608.445, Florida Statutes, the undersigned, being the Sole Member of STORMANN'S COFFEE OPERATIONS, LLC, hereby adopts these Articles of Dissolution pursuant to the following terms and conditions:

- 1. The name of the limited liability company is: STORMANN'S COFFEE OPERATIONS, LLC (the "Company").
- 2. The Articles of Organization of the Company were filed on August 3, 2007 and assigned document number L07000080035.
- 3. The effective date of dissolution of the Company shall be the date on which these Articles of Dissolution are filed with the Florida Department of State.
- 4. The Company's dissolution was approved by the affirmative vote of the sole member of the Company by written consent dated as of August 9, 2011 in accordance with the terms of Section 608.441, Florida Statutes.
- 5. Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.
- 6. There are no suits pending against the company in any court.

The undersigned Sole Member approves the dissolution of the Company as of this 9th day of August, 2011.

Detlef Fahle Stormann

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