

607 000084453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

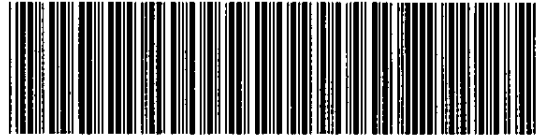
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400152709824

04/28/09--01037--015 **35.00

2009 JUN -5 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. CLINE

JUN - 8 2009

EXAMINER

607-84453



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2009

AROMAS TROPICALES, LLC
2510 AUBURN DRIVE
COCOA, FL 32926-5707

SUBJECT: AROMAS TROPICALES, LLC
Ref. Number: L07000084453

We have received your document for AROMAS TROPICALES, LLC and your check(s) totaling \$35.00. 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 your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 009A00014756

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN -5 PM 1:47

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AROMAS TROPICALES, 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:

SARA JULIA GONZALEZ
(Name of Person)

AROMAS TROPICALES, LLC
(Firm/Company)

2510 AUBURN DRIVE
(Address)

COCOA FL 32926-5707
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN -5 PM 1:47

FILED

For further information concerning this matter, please call:

Rosamaria C. Vitoria
(Name of Person)

at (321) 632-5871
(Area Code & Daytime Telephone Number)

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
2009 JUN -5 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

AROMAS TROPICALES, LLC

2. The Articles of Organization were filed on 03-31-2009 and assigned document number

L 07000084453

3. The date the dissolution was approved: 03-31-2009

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

Company never got office approved
by the City, and never started
to up and run

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Rosamaria C Vitoria