(R€	equestor's Name)	
(Ad	idress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	···

Office Use Only



200281435902

2016 JAN 27 P 12: 59

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 973996 7732494

AUTHORIZATION : Spullelens

COST LIMIT : \$'25/00

ORDER DATE: January 27, 2016

ORDER TIME : 2:33 PM

ORDER NO. : 973996-005

CUSTOMER NO: 7732494

DOMESTIC FILINGS

NAME: AREAS USA DD, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER'S INITIALS:

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Areas USA DD, 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:

Esther Sardiña								
(Name of Person)								
Areas USA								
(Firm/Company)								
5301 Blue Lagoon Dr., #690								
(Address)								
Miami, FL 33126								
(City/State	and Zip Code)	F. 22						
For further information concerning this matter, please call:		ALLAHASSE 7016 JAN 271						
Esther Sardiña	,786)						
(Name of Person)	(Area Coo	le & Daytime Telephone Number)						
Enclosed is a check for the following amount:		LOGIUS LOGIUS 1: 00						
☐ \$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

ļ.	The name of a limited liabil	lity company is			·				
2.	The Articles of Organizatio	n were filed on 12/05/2007		_ and assigned					
	document number L070001	20898							
3.	(effective Note: If the date inserted in the server of the	layed 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be as the document's effective date on the Department of State's records.							
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).								
	No longer operating business								
5.	•	ter the name and address of the	e person appointed	to wind up the compa	any's				
	activities and affairs:	5301 Blue Lagoon Drive, #690)	D					
		Miami, FL 33126		7 mg 4 mg 7	27				
				in co	T				
6. lis	Signature of an authorized pited above to wind up the con	person or if there are no memb inpany's activities and affairs: Jose	ers, the signature o	f the person appointe	a nd				
	Signature		Printee	l Name					
	'	FILING FEE:	\$25.00						