Division of Corporations

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To:

Division of Corporations

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Addount Name : QUARLES & BRADY OF TAMPA LLP

Account Number: 120100000038 Phone: (813)387-0285

FWx Number : (813)387-1800

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## LLC DISSOLUTION OR WITHDRAWAL PANACHE DESAI COMPANIES, LLC

Certificate of Status	0
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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability co		AI COMPANIES,	LLC	
The Articles of Organization wer	e filed on	04/23/2013	11	_ and assigned
document numberL070	000124720	<u>;</u>		
The delayed effective date the di- tellective date of Mote: If the date inserted in this bl- listed as the document's effective d	ock duck not meet	the applicable statutor	ւչ ննոչ	g: MARCH 31, 2018 document is received for filing) requirements, this date will not be
A description of occurrence that 605.0707, Florida Statutes, (copy UPON THE WRITTEN CO	605.0707 on ba	ck cover letter).		
LIMITED LIABILITY COMP	ANY.		-	
If there are no members, enter the activities and affairs:	e name and add	ress of the person ap	pointed	to wind up the company's
activities are arrairs.		ű) i		A 200
				SSE
		33		To a
Signature of an authorized personsted above to wind up the company	on or if there are	no members, the sig d affairs:	mature (	of the person appointed and
Sta M. Mine		JAN M. DE	SAI	
Signature		Printed Name		

FILING FEE: \$25.00

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## Notice of Limited Liability Company Dissolution

## NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: PANAC	CHE DESAI COMPANIES, LLC				
Document number of Limited Liability Company is:	L07000124720				
Date of dissolution was: 03 / 3 ¥ 2018					
Description of information that must be included in a writ	den elaim:				
THE LEGAL NAME OF THE CLAIMANT, THE C	CLAIMANT'S ADRESS AND OTHER				
CONTACT INFORMATION, THE NATURE OF	THE CLAIM, THE DATE THE CLAIM				
OCCURRED, AND THE AMOUNT OF THE CL	AIM.				
	`. }				
Mailing address where claims can be sent: (Claims canno 15275 COLLIER BOULEVARD	t be sent to the Division of Corporations)				
#201/114					
NAPLES, FL 34119	THE THE				
	10 <b>A</b>				
A claim against the above named limited liability compar claim is commenced within 4 years after the filing of this					
	Ma Mara				
JAN M. DESAI	1 Medelan				
Printed Name of the Person Filing	Signature of the Person Filing				

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00