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| Certified Copies                        | _ Certificates      | of Status    |
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| Special Instructions to Filing Officer: |                     |              |
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Office Use Only

M. THOMAS

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**EXAMINER** 



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O9 MAR 25 ATT J. T. SECRETARY OF STATE FLORIDA



March 4, 2009

JOSE P FUNCIA 9555 NORTH KENDALL DRIVE, STE 211 MIAMI, FL 33176

SUBJECT: LAMES AMERICA LLC Ref. Number: L08000016737

We have received your document for LAMES AMERICA LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 409A00007443

## COVER LETTER

| TO: Registration Section Division of Corporations  |   |
|--|---|
| SUBJECT: Lames America, LLC (Name of Limited Liability Company)  | ·<br>-  |
| (Name of Limited Listomty Company)   |   |
| The enclosed Articles of Dissolution and fee(s) are submitted for filing.  |   |
| Please return all correspondence concerning this matter to the following:  |   |
| Jose P. Funcia   |   |
| (Name of Person)   |   |
| Miller & Funcia, P.A.  |   |
| (Firm/Company)   | 09  |
| 9555 North Kendall Drive, Suite 211  | 野喜  |
| (Address)  | 題為是   |
| Miami, FL 33176  | SSEE TO   |
| (City/State and Zip Code)  | FOR FOR   |
| For further information concerning this matter, please call:   | OS MAR 25 M 9: 52 SECHETAGE FLORIDA SECHETAGE FLORIDA |
| Jose P. Funcia, Esq 305 , 274-2922   |   |
| (Name of Person) (Area Code & Daytime Telephone Number)  | •   |
| Enclosed is a check for the following amount:  |   |
| S25.00 Filing Fee   Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) | .scd)   |
| MAII ING ADDDESS. STREET/GOLDED ADDDESS.   |   |

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

| <ol> <li>The name of a limited liability company is<br/>Lames America, LLC</li> </ol>  |   |
|--|---|
| 2. The Articles of Organization were filed on L08000016737   | 5th, 2008 and assigned document number              |
| 3. The date the dissolution was approved: December 1st   | 1, 2008   |
| 4. A description of occurrence that resulted in the limited liabili 608.441, Florida Statutes, (copy 608.441 on back cover letter Lames America, LLC was opened inadve | ity company's dissolution pursuant to section r).   |
| operated or conducted any business at al   |   |
|  | 09  |
|  | EG 3  |
| 5. CHECK ONE:  | 25 25 ESSE  |
| All debts, obligations and liabilities of the limited lia OR-Adequate provision has been made for the debts, obl   | TITA  |
| <ol> <li>All remaining property and assets have been distributed amor<br/>rights and interests.</li> </ol>   | ng its members in accordance with the pectro        |
| 7. CHECK ONE:  |   |
| There are no suits pending against the company in ar -OR-Adequate provision has been made for the satisfaction entered against it in any pending suit.                 | •   |
| Signatures of the members having the same percentage of members  | ship interests necessary to approve the dissolution |
| Signature  | Printed Name  |
| K Say D  | Luisa E. Sanchez Pulido                             |
| 1-1  |   |
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| <u> </u>   |   |
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