

LOS000023740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

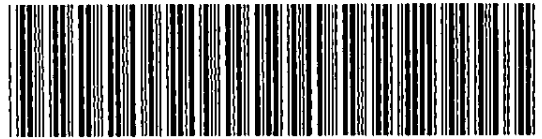
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700279448607

11/24/15--01002--015 \*\*25.00

RECEIVED  
DEPARTMENT OF STATE  
15 NOV 24 AM 11:26  
NOT INTENDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED  
15 NOV 24 AM 11:38  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

NOV 24 2015  
Y SULKER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MANONST, 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:

ANDREW L. JIMENEZ, ESQ.

(Name of Person)

JIMENEZ LAW OFFICES, P.A.

(Firm/Company)

100 SE THIRD AVE, SUITE 1514

(Address)

FORT LAUDERDALE, FL 33394

(City/State and Zip Code)

For further information concerning this matter, please call:

ANDREW L. JIMENEZ, ESQ.

(Name of Person)

at ( 954 ) 848-3111

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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**

1. The name of a limited liability company is

MANONST, LLC

2. The Articles of Organization were filed on 03/05/2008 and assigned

document number L08000023740

3. The delayed 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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

CONSENT OF ALL THE MEMBERS, PURSUANT TO FLA. STAT. SECT. 605.0701(2)

5. If there are no members, enter the name and address of the person appointed to wind up the company's

activities and affairs:

MANON ST-AMAND

771 SHERBROOKE

REPENTIGNY, QUEBEC J5Y 2G3

CANADA

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

DocuSigned by:

Manon St Amand

341F4980E79D497

Signature

MANON ST-AMAND

Printed Name

**FILING FEE: \$25.00**

FILED  
DEPT OF STATE  
TALLAHASSEE, FLORIDA

15 NOV 24 AM 11:38

## Notice of Limited Liability Company Dissolution

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: MANONST, LLC

Document number of Limited Liability Company is: L08000023740

Date of dissolution was: 11/24/2015

Description of information that must be included in a written claim:

ANY AND ALL EVIDENCE THAT WOULD SUPPORT  
A LEGAL CLAIM AGAINST THE COMPANY,  
SUCH AS INVOICES, BILLS, COURT PLEADINGS,  
AND THE LIKE.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

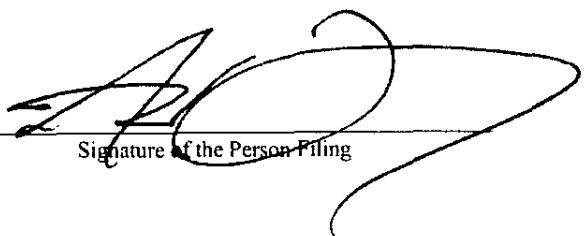
MANON ST-AMAND  
771 SHERBROOKE  
REPENTIGNY, QUEBEC J5Y 2G3  
CANADA

FILED  
15 NOV 24 AM 11:38  
DIVISION OF STATE  
TALLAHASSEE, FLORIDA

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

ANDREW L. JIMENEZ, ESQ.

Printed Name of the Person Filing

  
Signature of the Person Filing