## L0800036539

(Requestor's Name)				
(Address)				
(Ac	ddress)	•		
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
S. HAWKES				
FE	B 2 5 2009 INER			

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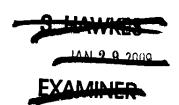


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SECRETARY OF STATE
TALLAHASSEE F LORIS





January 29, 2009

STEFAN LA GOTTI 201 INTERNATIONAL PKWY SUNRISE, FL 33325

SUBJECT: PAPA OUGOTS PIZZA, LLC

Ref. Number: L08000036539

We have received your document for PAPA OUGOTS PIZZA, 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 or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Letter Number: 009A00003357

Suzanne Hawkes Regulatory Specialist II

## **COVER LETTER**

Registration Section

Division of Corporations			
SUBJECT: Papa Ougots Pizza. LLC (Name of Limited Liability Company)			
(Nation Finance Flathing Company)			
•			
The enclosed Articles of Amendment and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Stefano La Gotti (Namo of Person)			
201 International PKWY			
201 International PKWY (Firm/Company)			
, , , , , , , , , , , , , , , , , , ,			
(Addresx)			
C			
Sunrise FL 33325 (City/State and Zip Code)			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
754 444-4180			
Stefano La Gotti at 954, 235-0060 (Name of Person) (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
Certificate of Status  Certificate of Status & Certificate			
MAILING ADDRESS: STREET/COURIER ADDRESS:			
Registration Section Registration Section			
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building			
Tullahassee, FL 32314 2661 Executive Center Circle			

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	Papa	Ougots	Przastec
2. The Articles of Organization were filed on	April 10,	2.00 <b>.}</b> an	d assigned document number
3. The date the dissolution was approved:	······································	······	
4. A description of occurrence that resulted in th 608.441, Florida Statutes, (copy 608.441 on b	e limited liability ( ack cover letter).	company's dissolu	rtion pursuant to section
	0		
5. CHECK ONE:			
OR- Adequate provision has been made fo  6. All remaining property and assets have been drights and interests.  7. CHECK ONE:  There are no suits pending against the OR- Adequate provision has been made fo entered against it in any pending suit.	istributed among i	ts members in acc	ordance with their respective
matures of the members having the same percentage	age of membership	interests necessar	ry to approve the dissolution:
Signature	_		o La fulti
	· <u>-</u>		
	-		
	-		
	_		

FILING FEE: \$25.00

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