

Division of Corporations

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**W08000071074**Florida Department of State  
Division of Corporations  
Public Access System

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## To:

Division of Corporations  
Fax Number : (850) 617-6383

## From:

Account Name : BARINAS & ASSOCIATES INC.  
Account Number : I20000000082  
Phone : (305) 871-0889  
Fax Number : (305) 870-9623SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDALLC DISS/WITH OR REV DISS  
CONNEXIONS UNLIMITED, LLC

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**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: CONNEXIONS UNLIMITED, 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:

YANELLE BARINAS

(Name of Person)

BARINAS AND ASSOCIATES, INC.

(Firm/Company)

5701 NW 36 STREET

(Address)

MIAMI, FL 33166

(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ROBERTO ONORATO

(Name of Person)

at ( 305 ) 986-9091

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ 30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
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  
**CONNEXIONS UNLIMITED, LLC**

2. The Articles of Organization were filed on **JULY 23, 2008** and assigned document number  
**L08000071074**

3. The date the dissolution was approved: **JULY 8, 2009**

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

**THE COMPANY WAS DISSOLVED BY UNANIMOUS DECISION OF  
THE MANAGING MEMBERS. THE DISSOLUTION RESULTED FROM  
FINANCIAL INSTABILITY.**

5. CHECK ONE:

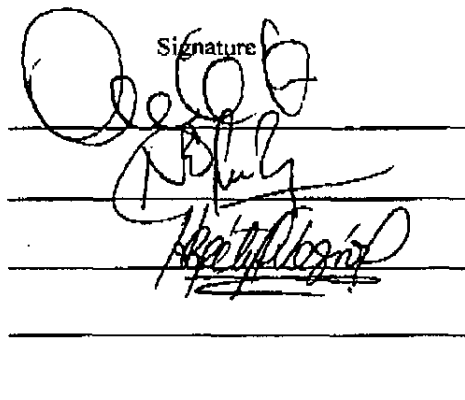
- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to section 608.441.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature  


Printed Name

**ROBERTO ONORATO**

**NESTOR E. OLIVARES**

**HECTOR NEGRON PRIETO**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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