LOSWO071524

(Requestor's Name)					
(Address)					
(Address)					
(Ci	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
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FILED 2015 SEP -8 A II: 36 SECRETARY OF STATE

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COVER LETTER

TO:

Registration Section Division of Corporations

WINNER PRODUCTS LLC

SUBJECT:

(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:

Eduardo A Alvarez (Name of Person) Winner Products LLC (Firm/Company) 10237 N W 9th St Circle #205 (Address) Miami, Florida 33172 (City/State and Zip Code) For further information concerning this matter, please call: Eduardo A Alvarez (Name of Person) (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 WINNER PRODUCTS LLC				
2.	The Articles of Organization	were filed on	008	_ and assigned	
	document number L0800007	1524	<u> </u>		
3.	Note: If the date inserted in th	elayed 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 do If the date inserted in this block does not meet the applicable statutory filing red			
	listed as the document's effecti	ve date on the Departmer	nt of State's records.		
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707, Florida Statutes, (copy 605.0707 on back cover letter). IS NOT GIVING THE PROFIT EXPECTED.				
				SECRE TI	
5.	If there are no members, ente activities and affairs:	r the name and address EDUARDO A ALVAR		o wind the company's	
		10237 N W 9TH ST CI	RCLE #205, MIAMI, FLOR	IDA 320 274 33	
				.,,>' .6-	
6. lis	Signature of an authorized potential above to wind up the comp	erson or if there are no pany's activities and at	members, the signature of fairs:	the person appointed and	
	8				
		and the same of th	EDUARDO A ALVARE		
	Signature	(FILING I	Printed FEE: \$25.00	Name	