## L080000 85724

(Requestor's Name)				
(Address)				
(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:				
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Office Use Only



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## **COVER LETTER**

TO:	Registration section Division of Corporations				
CURI	BITCINIR LLC				
SURJECT: [Name of I imited I inhibity Company)					
	return all correspondence concerning this matter to the				
	ROBERTO GONZALEZ				
	(Name of Person)				
GONZALEZ & PARTNERS CPAS LLC					
(Firm/Company)					
2199 PONCE DE LEON BLVD STE 200					
	(Address)  CORAL GABLES, FL 33134  (City/State and Zip Code)				
For fu	rther information concerning this matter, please call-	and Zip Codes			
	ROBERTO GONZALEZ	305 ut (	447-8886		
	(Name of Person)	(Area C	ode & Daytime Telephone Number)		
Enclos	ed is a check for the following amount:				
		\$55,00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building			

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clutton Building 2661 Executive Center Circle Tallahassee, FL 32301



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## FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE JALLAHASSEE, FLORIDA

June 24, 2015

**ROBERTO GONZALEZ GONZALEZ & PARTNERS CPAS LLC** 2199 PONCE DE LEON BLVD - STE 200 CORAL GABLES, FL 33134

SUBJECT: BITCINIR, L.L.C. Ref. Number: L08000085724

We have received your document for BITCINIR, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

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) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 215A00013276

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is BITCINIR LLC				
2.	The Articles of Organization were filed on 09/09/2008 and assigned				
	document number L08000085724				
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)				
4.	<ol> <li>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).</li> <li>DISPOSITION OF ALL ASSETS</li> </ol>				
5.	If there are no inembers, enter the name and address of the person appointed to wind up the company's activities and affairs:				
6.	Signature of an authorized person or if there are no members, the signature of the person appointed and				
H	sted above to wind up the company's activities and affairs:				
	9 Turana Belloso GUSTAVO R ALMARZA BELLOSO				
	Signature Printed Name FILING FEE: \$25.00				

FILED

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SECRETARY OF STATE A