L08010112579

(Requestor's Name)				
(Address)				
(Addiess)				
(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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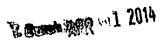
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SEURETARY OF STATE
TALLAHASSEE, FI ORIG





COVER LETTER

COVER LETTER				
TO: Registration Section Division of Corporations				
TEMIS SHIPPING LLC SUBJECT:				
(Name of Limited	d Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitte	d for filing.			
Please return all correspondence concerning this matter to the	ne following:			
MICHAEL BARRENECHE				
(Name	of Person)			
J. MICHAEL BARRENECHE PA				
(Firm/Company)				
1200 BRICKELL AVE STE 500				
(A	ddress)			
MIAMI, FL 33131	•			
(City/State	and Zip Code)			
For further information concerning this matter, please call:				
MICHAEL BARRENECHE	305 386-3579			
(Name of Person)	at ()(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 TEMIS SHIPPING LLC	y is	·
2.	The Articles of Organization were filed	02/09/2008 on	_ and assigned
	document number L08000112579	·	
3.	The delayed effective date the dissolution (effective date cannot be	on if not effective on the date of filing e prior to or more than 90 days later than date of	01/01/2014
4.	A description of occurrence that resulte 605.0707, Florida Statutes, (copy 605.07 CESSATION OF OPERATIONS	707 on back cover letter).	ssolution pursuant to section
			AS ≥
			TATE ORIDA
5.	If there are no members, enter the name activities and affairs:	e and address of the person appointed t	o wind up the company's
			<u> </u>
6. lis	Signature of an authorized person or if ted above to wind up the company's acti	there are no members, the signature of ivities and affairs:	the person appointed and
	elle -	CLAUDIO INSENG	A
	Signature	Printed	Name

FILING FEE: \$25.00