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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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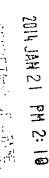




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COVER LETTER

	ration Section on of Corporations	
SUBJECT:	LOCOMBIA LLC (Name of Limited Liability Company)	
The enclosed A	rticles of Dissolution and fee(s) are submitted for filing.	
Please return all	correspondence concerning this matter to the following:	
	Eduardo M. Vargas (Name of Person)	
	(Firm/Company)	
	202 6th St. East (Address)	
	Tierra Verde FL 33715 (City/State and Zip Code)	
	rmation concerning this matter, please call:	ار از
Ed	rmation concerning this matter, please call: [Uardo Vargas at (727) 360 · 2394] (Name of Person) (Area Code & Daytime Telephone Number)	1
	ck 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: STREET/COURIER ADDRESS:	

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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	ty company is	
· · · · · · · · · · · · · · · · · · ·	Locombia LLC	
2. The Articles of Organization document number() ©	<u> </u>	
3. The delayed effective date th	e dissolution if not effective on the date of filing:	
4. A description of occurrence 605.0707, Florida Statutes, (c	that resulted in the limited liability company's dissolution pursuant to section copy 605.0707 on back cover letter).	
The prope	rty for which this LLC existed	
	on Sept. 16, 2013.	
activities and affairs:	Ecluardo M. Vargas (formerly ~ 202 6th St. East 59 Dolphin Tierra Verde, FL Treasure Isla 33715 (FL 33	ind
6. Signature of an authorized pe above to wind up the company?	erson or if there are no members, the signature of the person appointed and listed s activities and affairs:	
Signature	Printed Name	
MM	Eduardo M. Vargas	
	FILING FEE: \$25.00	
	NN 2 PH 2: 10	