## L09000027153

| (R                      | equestor's Name)    |            |
|-------------------------|---------------------|------------|
| . (A                    | ddress)             |            |
| (A                      | ddress)             |            |
| (C                      | ity/State/Zip/Phone | <i>#</i> ) |
| PICK-UP                 | MAIT                | MAIL .     |
| (B                      | usiness Entity Nam  | ne)        |
| (D                      | ocument Number)     |            |
| Certified Copies        | Certificates        | of Status  |
| Special Instructions to | Filing Officer:     |            |
|                         |                     |            |
|                         | -                   |            |
| ·                       |                     |            |

Office Use Only



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06/25/10--01008--025 \*\*125.00



S. HAWKES

JUN 2 8 2010

**EXAMINER** 



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 28, 2010

ROSA E LEON 16132 NW 14 COURT PEMBROKE PINES, FL 33028

SUBJECT: TIRECYCLE, LLC Ref. Number: L09000027153

We have received your document for TIRECYCLE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your LLC is still active in our records. So articles of revocation of dissolition cannot be filed.

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) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Letter Number: 810A00015852

www.sunbiz.org

## **COVER LETTER**

| Division of             | of Corporations                                  |  |  |
|-------------------------|--|--|--|
| SUBJECT:                | TIRE   | CYCLE, LLC   |  |
|                         | (Name of L                                       | imited Liability Company)  | i  |
|                         |  |  |  |
| The enclosed Artic      | les of Dissolution and fee(s) are su             | bmitted for filing.  |  |
| Please return all co    | rrespondence concerning this matte               | er to the following:   |  |
|                         |  | J  |  |
|                         | ROS  | SA E. LEON   |  |
|                         |  | (Name of Person)   |  |
| •                       | ROS  | SA E. LEON   |  |
| _                       |  | (Firm/Company)   |  |
|                         | 16132 N  | NW 14 COURT  |  |
| *********               | <del>*************************************</del> | (Address)  | <del></del>  |
|                         | PEMBROK  | (E PINES, FL 33028   |  |
| _                       | (Cit   | y/State and Zip Code)  |  |
|                         |  |  |  |
| For further informa     | tion concerning this matter, please              | call:  |  |
| ROSA                    | E. LEON  | at ( 954 ) 436-0   | 936  |
|                         | (Name of Person)                                 | (Area Code & Daytime   | Telephone Number)  |
| Engloced is a check for | or the following amount:                         |  |  |
|                         | _  | Con oo Pitter Dee 6  | Dece on rule p   |
| \$25.00 Filing Fee      | 30.00 Filing Fee & Certificate of Status         | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| N                       | MAILING ADDRESS:                                 | STREET/COU   | RIER ADDRESS:  |

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

Registration Section

TO:

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

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| and assigned document number 2010 y company's dissolution pursuant to section  |
|--|
| •  |
| y company's dissolution pursuant to section  |
|  |
|  |
| positive company have been paid or discharged.  gations and liabilities pursuant to s. 608.4421.  In of any judgment, order or decree which may be |
| nip interests necessary to approve the dissolution:  |
| Printed Name   |
| JUAN PENA  |
| PAOLA DELGADO  |
|  |
|  |
|  |
| ,  |

**FILING FEE: \$25.00**