

#L09000039511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

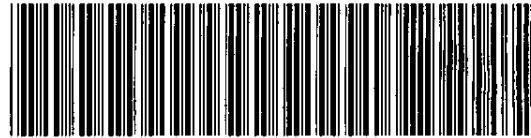
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/25/11--01014--006 **30.00

FILED

11 FEB -3 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
FEB 3 2011



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2011

CP ASSOCIATED SERVICES INC.
PETER CAMACHO
4545 FOREST HILL BLVD., STE. 8
WEST PALM BEACH, FL 33415

SUBJECT: QUALITY PRODUCE LLC
Ref. Number: L09000039511

We have received your document for QUALITY PRODUCE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

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) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 511A00002316

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: QUALITY PRODUCE LLC
(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:

PETER CAMACHO

(Name of Person)

CP ASSOCIATED SERVICES INC

(Firm/Company)

4545 FOREST HILL BLVD STE 8

(Address)

WEST PALM BEACH, FL 33415

(City/State and Zip Code)

For further information concerning this matter, please call:

PETER CAMACHO

(Name of Person)

at (561) 2375520

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐

\$25.00 Filing Fee

☒

\$30.00 Filing Fee &
Certificate of Status

☐

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐

\$60.00 Filing Fee,
Certificate of Status &
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

FILED
11 FEB -3 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

QUALITY PRODUCE LLC

2. The Articles of Organization were filed on 04/23/2009 and assigned document number L09000039511

3. The date the dissolution was approved: JAN/20/2011

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

The partnership decided to dissolve the
LLC due to the termination of
the sales contract of their only customer
the partners decided to dissolve

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

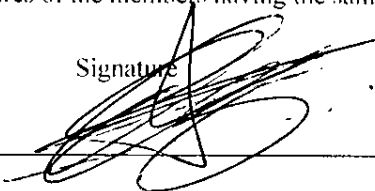
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature



Printed Name

EDUARDO CASTRO