L09000047419

(Requestor's Name)
(Address)
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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T. CLINE

MAR 1 4 2011

EXAMINER



March 1, 2011

ERWIN FELICILDA 11219 ROSE CANYON HELOTES, TX 78023

SUBJECT: NEWAVE DEZIGN LLC Ref. Number: L09000047419

We have received your document for NEWAVE DEZIGN LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline Regulatory Specialist II Letter Number: 311A0000502

March 9, 2011

TAMMI CLINE
Regulatory Specialist
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Subject: Newave Dezign LLC Ref. Number: LO9000047419

In compliance with your instruction, we are returning herewith the attached documents on Articles of Dissolution for a Limited Liability Company together with the Cover Letter duly accomplished. We are also remitting the amount of SEVEN DOLLAR (\$7.50) and FIFTY CENTS adding to FIFTY-TWO (\$52.50) DOLLARS AND FIFTY CENTS previously remitted, these will total to SIXTY (\$60.00) DOLLARS to cover for Filing Fee, Certificate Status & Certified Copy (additional copy is enclosed).

Sincerely

ERWIN RELICILDA

SECRETARY OF STATE

FILED

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Newave Dezign LLC (Name of Limited Mabilia Company)
(Name of Enfined Gaonthy Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Erwin Felicilda (Name of Person)
(Name of Person)
Newave Dezign LLC (Firm/Company)
(Firm/Company)
11219 ROSE CANYON (Address)
(Address)
Helotes TX 78023 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Erwin Felicida at (352) 316-6717 (Name of Person) (Area Code & Daytime Telephone Number)
(New Code to Sayania Telephone Names)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) 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 DIS	SOLUTION	
A LIMITED LIABILIT	TY COMPANY	T.SECRE
1. The name of a limited liability company is	5	ASA = F
NEWAVE DEZION LLC		
2. The Articles of Organization were filed on May 1	15, 2009 and assigned do	Siment mimber
3. The date the dissolution was approved: Fabruary	7 18,2011	
4. A description of occurrence that resulted in the limited liab 608.441, Florida Statutes, (copy.608.441 on back cover let	vility company's dissolution pursuant ter).	to section
,	DEZIGN, LLC	WANTED
AND VOTE TO DISSOLVE	THE COMPANY	BECAUSE
OF LACK OF CAPITALIZAT	IDN	
	<u> </u>	
5. CHECK ONE:		
All debts, obligations and liabilities of the limited OR-Adequate provision has been made for the debts, of All remaining property and assets have been distributed as	bligations and liabilities pursuant to s	s. 608.4421.
All remaining property and assets have been distributed an rights and interests.	long its memoers in accordance with	their respective
7. CHECK ONE:		
There are no suits pending against the company in	any court.	
Adequate provision has been made for the satisfact entered against it in any pending suit.	tion of any judgment, order or decree	which may be
natures of the members having the same percentage of members	ership interests necessary to approve t	the dissolution:
Signature	Printed Name	
	FELICISIMO C. FE	ELICILDA
	ERWIN FELIC	1604
	CYNTHIA FEL	ICILDA
Alelitis	RYAN FELIC	ILPA
,		

FILING FEE: \$25.00