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(Re	questor's Name)		
(Address)			
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3ECRETARY OF STATE

TALLAHASSEE FIRETER

J. SAULSBERRY EXAMINER

JUN 5 2012

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Onique Pashminas, UC (Name of Limited Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted for filing.	2012 JUN -4 SECRETAR) TALLAHASSI
Please return all correspondence concerning this matter to the following:	
DANIEL SAMOOHII (Name of Person)	TARY OF STATE
Unique Pashuinas, UL	9: 16 DRIDA
16699 Callins Ave Unit	<u>4</u> 107
Sumy Isles Beach, Fl 33/ (City/State and Zip Code)	60
For further information concerning this matter, please call: Dawlet Samoom at 917 609 - 8 (Name of Person) (Area Code & Daytime Telephone Number 1)	707 mber)
Enclosed is a check for the following amount: S25.00 Filing Fee	of Status &
MAILING ADDRESS: STREET/COURIER ADE Registration Section Registration Section	DRESS:

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 company is)
- ONIQUE FO	4SMMINAS, LLC
2. The Articles of Organization were filed on	22/09 and assigned document number
3. The date the dissolution was approved: 5/6	99/12
4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cove	I liability company's dissolution pursuant to section
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5. CHECK ONE:	CORNING TO THE CORNIN
OR- Adequate provision has been made for the deb 6. All remaining property and assets have been distribute rights and interests. 7. CHECK ONE: There are no suits pending against the companion.	
ignatures of the members having the same percentage of me	embership interests necessary to approve the dissolution:
Signature Samuel James pi	Printed Name NANIEL SAMOONII