

L09000051772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

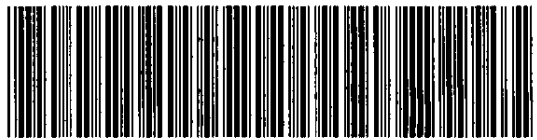
(Document Number)

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10/22/03--01025--014 \*\*43.75

11/06/03--01001--003 \*\*11.25

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09 NOV -4 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN OCT 29 2009

J. BRYAN

NOV -5 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 29, 2009

ROBERTO KASINSKY  
14505 SW 260 ST.  
MIAMI, FL 33032

SUBJECT: DOCTV, LLC  
Ref. Number: L09000051772

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for DOCTV, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

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) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 309A00034291

attached payment for  
additional \$11.25, balance  
due for filing fee & certified  
copy.

Thank you.

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DOCTV LLC  
(Name of Limited Liability Company)

**FILED**  
09 NOV -4 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roberto Kasinsky  
(Name of Person)

(Firm/Company)

14505 SW 260 St.

(Address)

Miami, FL 33032

(City/State and Zip Code)

For further information concerning this matter, please call:

Roberto Kasinsky at ( 305 ) 2573474  
(Name of Person) (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  
09 NOV - 4 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

DOCTV LLC

2. The Articles of Organization were filed on

May 27'09

and assigned document number

L09000051772

3. The date the dissolution was approved:

Oct 19'09

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).

lack of business

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

ROBERTO KASINSKY