

LD9000059843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

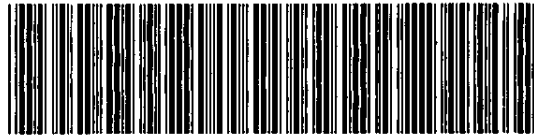
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TALLAHASSEE, FLORIDA

N. O'Dell APR 20 2010

# Aida L. Cabello-Colón, L.L.C.

Attorney and Counselor at Law

*Orlando Mailing Address*

P.O. Box 781269  
Orlando, FL 32878  
Telephone (407) 925-9748  
Fax (407) 207-1168  
Email – acabellocolon@msn.com

April 11, 2010

REGISTRATION SECTION

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

Re: V.M. TORRALES, L.L.C.

Dear Sir/Madame:

In accordance with Florida Statutes 608.445 dealing with the voluntary dissolution of a Florida Limited Liability Company enclosed please find the following documents:

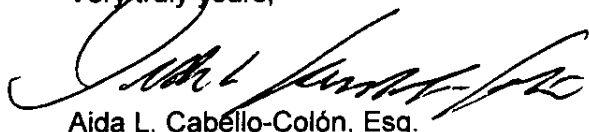
1. Articles of Dissolution;
2. V.M. TORRALES, L.L.C. written consent by all members of this Limited Liability Company in accordance with Florida Statute Section 608.441(1) ( c); and
3. Check for Filling Fee and Certificate of Status in the amount of \$30.00.

Please forward all correspondence regarding this matter to the following address:

Aida L. Cabello-Colon, Esq.  
Aida L. Cabello-Colon, L.L.C.  
13024 Marsh Fern Drive  
Orlando, Florida 32828

If you have any questions regarding this matter please call me at 407-925-9748. Thank you for your assistance in this matter.

Very truly yours,



Aida L. Cabello-Colón, Esq.

c: Mr. Victor M. Torrales

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

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TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
V. M. TORRALES, L.L.C.

2. The Articles of Organization were filed on June 19, 2009 and assigned document number  
L09000059893

3. The date the dissolution was approved: April 30, 2010

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).

Pursuant to written consent by all members of the limited liability company in accordance with Florida Statute Section 608.441(1)(c), all members of V.M. TORRALES, L.L.C. agree and consent to the dissolution of this company. (Copy of written consent attached).

**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.

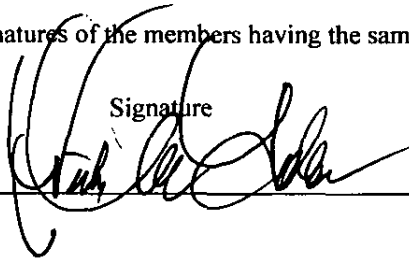
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

**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

Victor M. Torrales, Member

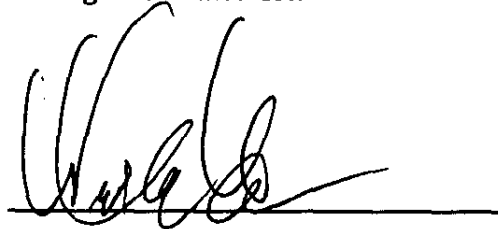
**V. M. TORRALES, L.L.C.**

**Consent for Dissolution**

In accordance with the provisions available under Florida law for the voluntary dissolution of a Limited Liability Company this document constitutes the written agreement and consent of all the members of V.M. Torrales, L.L.C. Therefore, all members hereby agree and consent to the *dissolution of the Limited Liability Company, V. M. TORRALES L.L.C. effective April 30, 2010.*

There are no debts, obligations, and liabilities of the limited liability company. There are no suits pending against the company in any court. All assets and property have been distributed among its members in accordance with their respective rights and interests.

Dated: 4-11-2010

A handwritten signature in black ink, appearing to read 'Victor M. Torrales', is written over a horizontal line.

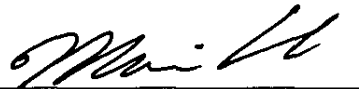
VICTOR M. TORRALES, Only Member

STATE OF FLORIDA \_\_\_\_\_)

COUNTY OF ORANGE \_\_\_\_\_)

The foregoing instrument was sworn to and subscribed before me this 11<sup>th</sup> day of April, 2010, by **VICTOR M. TORRALES** who is personally known to me or who has produced DRIVER LICENSE STATE OF FLORIDA as identification

(NOTARY SEAL)



Notary Public #DD545676

Print Name: MARIO COLON

My commission expires: 6/11/2010

