## L09000075575

| (Requestor's Name)                      |  |  |  |  |  |
|---|--|--|--|--|--|
| (Address)                               |  |  |  |  |  |
| (Address)                               |  |  |  |  |  |
|   |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (Dadinoso Emily Hamo)                   |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
| <u> </u>                                |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |

Office Use Only



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11/16/10--01027--009 \$730.00



J. BRYAN

NOV 17 2010

**EXAMINER** 

## **COVER LETTER**

|                    | ration Section<br>on of Corporations   |   |  |          |  |
|--------------------|--|---|--|----------|--|
| SUBJECT: D         | OLAN AMERICA, LLC  |   |  | _        |  |
|                    | (Name of Li  | mited Liability Company)                                  |  | -        |  |
|                    |  |   |  |          |  |
| The enclosed A     | rticles of Dissolution and fee(s) are sub  | mitted for filing.  |  |          |  |
| Please return all  | correspondence concerning this matter  | to the following:   |  |          |  |
|                    | ROBER  | TO G TOMAS  |  |          |  |
| (Name of Person)   |  |   |  |          |  |
|                    | DOLAN AMERICA, LLC   |   |  | 5<br>否 啊 |  |
| (Firm/Company)     |  |   |  |          |  |
|                    | DOLAN AMERICA, LLC  (Firm/Company)  13639 SW 26 STREET  (Address)  MIAMI FL 33175                  |   |  |          |  |
|                    | (Address)  |   |  |          |  |
| MIAMI FL 33175     |  |   |  |          |  |
|                    | (City)   | (State and Zip Code)                                      | 7  |          |  |
| For further info   | rmation concerning this matter, please c   | all:  |  |          |  |
| ROE                | BERTO G TOMAS  | at (_305  | 400-4977   |          |  |
|                    | (Name of Person)   |   | & Daytime Telephone Number)  | -        |  |
| Enclosed is a chec | ck for the following amount:   |   |  |          |  |
| \$25.00 Filing F   | Fee   √30.00 Filing Fee & Certificate of Status  | \$55.00 Filing Fee & Certified Copy (additional copy is e | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclo | osed)    |  |
| ·                  | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Registra<br>Division<br>Clifton                           | T/COURIER ADDRESS: ation Section of Corporations Building accutive Center Circle     |          |  |

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| <ol> <li>The name of a limited liability company is<br/>DOLAN AMERICA, LLC</li> </ol>  | HASSET PR   |
|--|---|
| 2. The Articles of Organization were filed on LO9000075575   | 2009 and assigned document number   |
| 3. The date the dissolution was approved: NOVEME   | BER 1, 2010   |
| 4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back coverage)   |   |
| to dissolve its venture.   |   |
| 5. CHECK ONE:  |   |
| OR-Adequate provision has been made for the del  | nited liability company have been paid or discharged.  bts, obligations and liabilities pursuant to s. 608.4421.  btd among its members in accordance with their respective |
| 7. CHECK ONE:  |   |
| <ul> <li>✓ There are no suits pending against the compar -OR-</li> <li>Adequate provision has been made for the satientered against it in any pending suit.</li> </ul> | ny in any court. isfaction of any judgment, order or decree which may be  |
| ignatures of the members having the same percentage of m   | embership interests necessary to approve the dissolution:   |
| Signature  | Printed Name  |
|  | ROBERTO G TOMAS FOR   |
|  | DOLAN ARGENTINA, SRL  |
|  |   |
|  |   |

**FILING FEE: \$25.00**