L090000 87977

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL .
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

of functions

J. Shivers DEC 1 0 2014



COVER LETTER . •

TO:

Registration Section

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations		
SUBJECT: Liquid Advertising, LLC		
(Name of Limited Liability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Mocco A. Spada Ford (Name of Person)		
(Name of Person)		
(Firm/Company)		
3500 Galf OCENN DAINE, T2903		
(Address)		
3500 Galf OCEAN DAINE, #2903 (Address) Fort Landerdale FL 33308 (City/State and Zin Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
12 A Carlana 950 195 V119		
A. A. Japan at (954) 195. 41/2 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee and Certificate of Dissolution - \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: 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

1.	The name of a limited liability company is Liquid RAWP+15ing, LLC.
2.	The Articles of Organization were filed on August 17, 2009 and assigned
	document number <u>L 09000 83937</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: OEL 31-72014 (effective date cannot be prior to or more than 90 days later than date document is received for filing)
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	Forming a portnership with a new ventual.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: **Bocco Spalatel***
	Fort lyudodale, Fl 33308
	Fort lyudodell, FL 33300
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
	Asco A. Sportatel
	Signature Printed Name S
	FILING FEE: \$25.00