109100097407

| (Re | questor's Name) | | | | |
|---|-----------------|-----------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
| | | ! | | | |
| | | | | | |
| | | | | | |

Office Use Only



400186742714

10/19/10--01010--001 **25.00

FILED

10 NOV -5 PM II: 18

SECRE HARY OF STATE

THANKS O

D. BRUCE

NOV 8 2010

EXAMINER

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 20, 2010

MARK ALVAREZ 5231 SW 89 PLACE MIAMI, FL 33165

SUBJECT: HOTESINO, LLC Ref. Number: L09000097407

We have received your document for HOTESINO, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 410A00024864

10 NOV -5 PM 1: 18

COVER LETTER

| | Registration Division of (| | | | | | | |
|------------|-------------------------------|---|--|--|----------------------------|---|------|-------|
| SUBJEC | :T: Hote | sino, LLC | · | | | | | |
| | | (Name of I | imited Liability Compa | iny) | | | _ | |
| | | of Dissolution and fee(s) are su spondence concerning this man | _ | | | | | |
| | Ma | rk Alvarez | | | | | | |
| | | | (Name of Person) | | | | | |
| | | ž | | | | | | |
| | | | (Firm/Company) | | | | | |
| | 523 | 31 SW 89 Place | | | | | 5 | |
| | | | (Address) | | ···· | | | **** |
| | Mia | ami, FL 33165 | | | | N.S.A. | V -5 | |
| | | (Cir | y/State and Zip Code) | | | | PM | } |
| For furth | er informatio | n concerning this matter, please | call: | | | F S EXT | ÷ | C |
| | Mark Al | varez | at (305 | , 7996 | S275 | A A | œ | |
| - | | (Name of Person) | | ode & Daytim | e Telephone N | lumber) | | |
| Enclosed i | is a check for t | he following amount: | | | | | | |
| | Filing Fee | 30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee Certified Copy (additional copy | | Certificate Certified (| Filing Fee, of Status & Copy Il copy is er | & | |
| | Reg Div P.C | AILING ADDRESS: gistration Section ision of Corporations b. Box 6327 lahassee, FL 32314 | Regi Divis Clift | stration Session of Cor on Building | porations | | : | |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| The name of a limited liability company is Hotesino, LLC | | | |
|--|---|--|--|
| 2. The Articles of Organization were filed on 10/08/20 L09000097407 | and assigned document number | | |
| 1 | 0/10 | | |
| 4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cover A limited liability company organized to the control of the the control | | | |
| and the limited liability company's affa | nirs shall be concluded | | |
| upon the written consent of all of the m | embers of the limited liability company | | |
| 5. CHECK ONE: | | | |
| | ted liability company have been paid or discharged. s, obligations and liabilities pursuant to s. 608.4421. | | |
| Ail remaining property and assets have been distributed rights and interests. | • | | |
| 7. CHECK ONE: | | | |
| There are no suits pending against the company | in any court. | | |
| Adequate provision has been made for the satis entered against it in any pending suit. | faction of any judgment, order or decree which may be | | |
| Signatures of the members having the same percentage of me | mbership interests necessary to approve the dissolution: | | |
| Signature Printed Name | | | |
| Toph | Antonio J. Castro | | |
| | Mark Alvarez | | |
| | ARE TO T | | |
| | SSE -5 | | |
| ŋ | | | |
| | A SE | | |
| FILING F | EE: \$25.00 | | |