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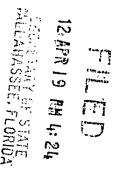
(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

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03/28/12--01011--021 \*\*25.00



D. BRUCE
APR 2 0 2012

**EXAMINER** 



March 29, 2012

JOSEFINA SANTOS ACCOUNTAX OFFICE SERVICES, CORP. 7590 NW 186 STREET STE. 206A MIAMI, FL 33015

SUBJECT: GREENWAY CONSULTING, LLC

Ref. Number: L10000002948

We have received your document for GREENWAY CONSULTING, 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):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 212A00010558

## **COVER LETTER**

TO: Registration Section Division of Corporations	# <u># 1                                  </u>	
SUBJECT: GREENWAY CONSULTI		
(Name of Lin	mited Liability Company)	
	•	
The enclosed Articles of Dissolution and fee(s) are sub	omitted for filing.	e e e
Please return all correspondence concerning this matter	r to the following:	
JOSEF	FINA SANTOS	
(1	Name of Person)	
ACCOUNTAX	OFFICE SERVICES,	CORP.
	Firm/Company)	<u></u> _
7500 NIW 19	SE STREET STE 2067	*1 311
7390 100 10	B6 STREET STE. 206A	
, , , 1900 <u></u>	MI FL 33015	55 <b>5 7</b>
(City)	/State and Zip Code)	
For further information concerning this matter, please c	nall:	LORI
Tot father information concerning and matter, prease c	· · · · · · · · · · · · · · · · · · ·	
	at ()	
(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount:		
\$25.00 Filing Fee 30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,
Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COU	RIER ADDRESS:
Registration Section	Registration Section	
Division of Cornerations	Division of Cornerations	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability company is     GREENWAY CONSULTING LLC	
2. The Articles of Organization were filed on <u>01/01/2</u> L10000002948	and assigned document number
3. The date the dissolution was approved: 11/08/201	1
4. A description of occurrence that resulted in the limited _608.441, Elorida Statutes, (copy-608.441 on back cover	
The corporation never star	ted operations.
5. CHECK ONE:	
All debts, obligations and liabilities of the limi	ited liability company have been paid or discharged. ts, obligations and liabilities pursuant to s. 608.4421.
6. All remaining property and assets have been distributed rights and interests.	d among its members in accordance with their respective
7. CHECK ONE:  There are no suits pending against the company of the satisfactory of t	y in any court. sfaction of any judgment, order or decree which may be
gnatures of the members having the same percentage of me	embership interests necessary to approve the dissolution:
Signature	Printed Name
try N. h	JUAN J HABERKORN
//	ASE SE
	Co B M
	L: 24 DRIDA