110000018523

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
	☐ WAIT	_
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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		:

Office Use Only



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2015-U.S. 28 - Fr. 38 40

B. BOSTICK

JAN 2 9 2014

EXAM 7 3

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT:	Di Losso Toports LLC (Name of Limited Liability Company)		
The enclosed Art	ticles of Dissolution and fee(s) are submitted for filing.		
Please return all	correspondence concerning this matter to the following:		
	(Name of Person)	-	
	(Firm/Company)	-	
	4417 Harter Herr La E	P . 23	
	4417 Harter Hown In E (Address) Jacksonwill, FL 3224	2018 JULY 28 ALL ANN 951	
·	(City/State and Zip Code)		
For further inform	nation concerning this matter, please call:	91 :6	
	(Name of Person) at (704) 778-2001 (Area Code & Daytime Telephone Number	ber)	
Enclosed is a check	k for the following amount:		
\$25.00 F	Filing Fee and Certificate of Dissolution \$55.00 Filing Fee, Certificate of Discours of Certified Copy (additional copy is a		

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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 liabili	ty company is
D: L	USSO Inforts.
2. The Articles of Organization document number	were filed on 2/15/10 and assigned L10000018523
3. The delayed effective date the	ne dissolution if not effective on the date of filing:
4. A description of occurrence 605.0707, Florida Statutes, (that resulted in the limited liability company's dissolution pursuant to section copy 605.0707 on back cover letter).
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a lact of	50/05
	
5. If there are no members, ent activities and affairs:	er the name and address of the person appointed to wind up the company's
	4417 Hater Homes La E
	Jacksonville, FL 32004
6. Signature of an authorized p above to wind up the company'	erson or if there are no members, the signature of the person appointed and listed s activities and affairs:
Signature	Printed Name
Oristyla B	e Christopher Bryon
_	FILING FEE: \$25.00
	IA. 22



January 9, 2014

CHRIS BRYAN DI LUSSO IMPORTS, LLC 4417 HUNTERS HAVEN LANE E JACKSONVILLE, FL 32224

SUBJECT: DI LUSSO IMPORTS, LLC

Ref. Number: L10000018523

We have received your document for DI LUSSO IMPORTS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Barbara Bostick Regulatory Specialist II

Letter Number: 514A00000633