

L100000021386

(Requestor'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:

L. SELLERS

MAY - 7 2010

EXAMINER

Office Use Only



900173375529

04/08/10--01015--003 **35.00

FILED

10 MAY - 6 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

uc

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALTABELLA GROUP, 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:

ED TREVISANI

(Name of Person)

ALTABELLA GROUP LLC

(Firm/Company)

419 CONESTOGA ROAD

(Address)

RADNOR, PA 19087

(City/State and Zip Code)

For further information concerning this matter, please call:

ED TREVISANI

(Name of Person)

at (610) 293 9300

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



30.00 Filing Fee &
Certificate of Status



\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 14, 2010

ED TREVISANI
419 CONESTOGA ROAD
RADNOR, PA 19087

SUBJECT: ALTABELLA GROUP, LLC
Ref. Number: L10000021386

We have received your document for ALTABELLA GROUP, 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):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 510A00009247

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

ALTA BELLA GROUP, LLC

2. The Articles of Organization were filed on 2/25/10 and assigned document number

L10000021386

3. The date the dissolution was approved: 3/31/10

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

COMPANY DID NO BUSINESS; PRINCIPAL
MOVED OUT OF FLORIDA

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Edmund Treviño

Printed Name

Edmund Treviño

FILED
10 MAY -6 AM 11:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE: \$25.00