

L10000060553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

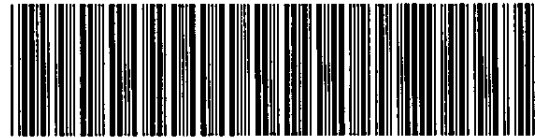
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 FEB 18 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
FEB 19 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rodrigo Garcia, 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:

John Patterson, Esq.

(Name of Person)

Shutts & Bowen LLP

(Firm/Company)

46 N. Washington Blvd., #1

(Address)

Sarasota, FL 34236

(City/State and Zip Code)

For further information concerning this matter, please call:

John Patterson

(Name of Person)

at (941) 365-0550

(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:

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**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

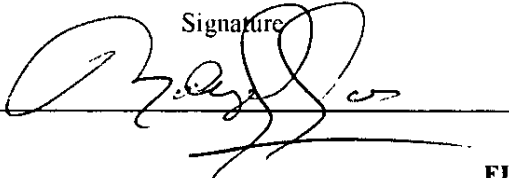
1. The name of a limited liability company is
Rodrigo Garcia, LLC
2. The Articles of Organization were filed on June 7, 2010 and assigned
document number L10000060553
3. The delayed effective date the dissolution if not effective on the date of filing: _____
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
Written Consent by all of the Members to Dissolution

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Dr. Rodrigo Garcia, MGRM

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed
above to wind up the company's activities and affairs:

Signature

Printed Name



Dr. Rodrigo Garcia

FILING FEE: \$25.00

FILED
2014 FEB 18 PM 2:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**WRITTEN ACTION OF MEMBERS OF
RODRIGO GARCIA, LLC**

The undersigned, being all of the members (the "Members") of **RODRIGO GARCIA, LLC**, a Florida limited liability company (the "Company") hereby consent to the following actions in lieu of a meeting:

1. Articles of Dissolution, a copy of which is attached, are hereby ratified, approved, and confirmed.
2. Authorization: Rodrigo Garcia, as Managing Member, is hereby authorized to execute any and all agreements, documents, and instruments on behalf of the Company as deemed necessary and appropriate, but in accordance with any limitations imposed in the Operating Agreement.


Dr. Rodrigo Garcia
Managing Member