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FILED  
JAN 10 1964  
FBI - ST. LOUIS

APR 06 2017  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LATIN AMERICAN LIFT DISTRIBUTOR 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:

RAFAEL BERTORELLI

(Name of Person)

LATIN AMERICAN LIFT DISTRIBUTOR LLC

(Firm/Company)

1500 WESTON RD. SUITE 200

(Address)

WESTON, FL 33326

(City/State and Zip Code)

For further information concerning this matter, please call:

RAFAEL BERTORELLI at 954 449-8708

(Name of Person)

(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

1. The name of a limited liability company is  
LATIN AMERICAN LIFT DISTRIBUTOR LLC

3. The delayed effective date the dissolution if not effective on the date of filing: 04/01/2017  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Maian Ozer  
Signature

MARIANELLA PAEZ  
Printed Name

**FILING FEE: \$25.00**

17 APR - PM 4:36

FILED