

L 10000 076044

(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:

Office Use Only



300279119623

11/18/15--01022--010 \*\*75.00

FILED  
15 NOV 18 AM 7:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 19 2015

J SHIVERS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ARIGATO JAPANESE STEAK HOUSE 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:

DALE DEL BELLO

(Name of Person)

(Firm/Company)

18212 SUNSET BLVD

(Address)

REDINGTON SHORES FL 33708

(City/State and Zip Code)

For further information concerning this matter, please call:

DALE DEL BELLO

(Name of Person)

at ( 727 ) 743-3434

(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**

1. The name of a limited liability company is  
ARIGATO JAPANESE STEAK HOUSE LLC

2. The Articles of Organization were filed on 07/19/2010 and assigned  
document number L10000076043

3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(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.

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).  
BUSINESS IS CLOSED

5. If there are no members, enter the name and address of the person appointed to wind up the company  
activities and affairs: DALE DEL BELLO

18212 SUNSET BLVD

REDINGTON SHORES FL 33708

15 NOV 18 AM 7:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

DALE DEL BELLO

Printed Name

**FILING FEE: \$25.00**