

L10 0000 79678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

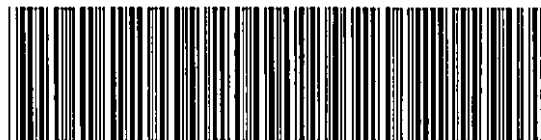
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 SEP -9 PM 5:26
SECURITY UNIT
TALLAHASSEE, FL

D. BRUCE
OCT 22 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RUBEN SPINRAD P.L.

(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:

ERSIN ARAL

(Name of Person)

(Firm/Company)

636 RIVERSIDE DRIVE

(Address)

NORTH PALM BEACH FL 33408

(City/State and Zip Code)

For further information concerning this matter, please call:

ERSIN ARAL

(Name of Person)

561

644-3710

at (

_____) (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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

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

1. The name of a limited liability company is

RUBEN SPINRAD P.L.L.

2. The Articles of Organization were filed on July 29, 2010 and assigned

document number L10000079678

3. The delayed effective date the dissolution if not effective on the date of filing: 8/31/2020
(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).

Owner died , his law practice closed

Owner died , his law practice closed

Owner died , his law practice closed

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

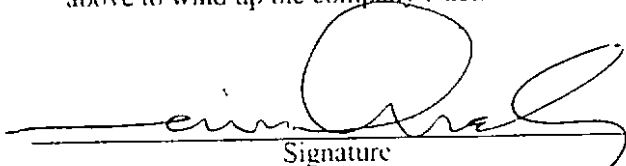
Ersin Aral , 636 Riverside Drive, North Palm Beach FL 33408

David C. Wiitala, 8401 S Elizabeth Av, Palm Beach Gardens, FL 33418

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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

Ersin Aral

Printed Name

FILING FEE: \$25.00