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(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:		
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05/05/11--01028--001 **52.56

06/06/11--01003--017 **7.50



D. BRUCE

JUN 0 6 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2011

TERESITA & SILVIA DAVALOS 16434 SW 84 ST MIAMI, FL 33193

SUBJECT: DAVALOS AND DAVALOS LLC

Ref. Number: L10000092416

We have received your document for DAVALOS AND DAVALOS LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filled and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The fee to file your limited liability company document is \$25. Please include an additional \$30 for each certified copy (optional) requested and an additional \$5 for each certificate of status (optional) requested.

There is a balance due of \$7.50.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 611A00012307

COVER LETTER

DISOLVE	DAVALOS AND DAVALOS LLC.
	DAVALOS AND DAVALOS LLC. (Name of Limited Liability Company)
rticles of Dissolution and	d fce(s) are submitted for filing.
l correspondence concern	ning this matter to the following:
TERESITA	AND SILVIA DAVALOS
	(Name of Person)
.	
DAVA	ALOS AND DAVALOS LLC. (Firm/Company)
16434	S.W. 84 ST. (Address)
	(Address)
MIAMI	
<u> </u>	FL. 33193 (City/State and Zip Code)
rmation concerning this n	matter, please call:
RESITA DAVAL	(Area Code & Daytime Telephone Number)
RESITA DAVAI	
(Name of Person	
(Name of Person	· ·
(Name of Personate (Name of Pers	t: ng Fee &\$55.00 Filing Fee &\$60.00 Filing Fee, te of Status & Certificate of Status &
(Name of Personate (Name of Pers	t: ng Fee &\$55.00 Filing Fee &\$60.00 Filing Fee, to of Status
(Name of Personate (Name of Pers	t: ng Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,
	TERE SITA DAV 16434 MIAMI

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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	
DAVALOS AND DAVALOS	LLC
2. The Articles of Organization were filed onSE	EPT. 2nd 2010 and assigned document number
L100000 92416	
3. The date the dissolution was approved: MAY	1ST 2011
4. A description of occurrence that resulted in the limit 608.441, Florida Statutes, (copy 608.441 on back co	ed liability company's dissolution pursuant to section over letter).
MUTUAL AGREEMENT.	
	ASS 1
5. CHECK ONE:	in a second
	imited liability company have been paid or discharged:
OB-	lebts, obligations and liabilities pursuant to 608.421.
o. All remaining property and assets have been distributing rights and interests.	ated among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the comp	pany in any court.
OR-	atisfaction of any judgment, order or decree which may be
signatures of the members having the same percentage of	membership interests necessary to approve the dissolution:
Signature	Printed Name
A-(1)	
Jarenja Lavaja	TERESITA DAVALOS
<u> </u>	
·	<u> </u>