

L1000104293

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

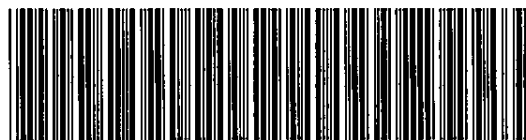
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100254908621

01/17/14--01021--019 \*\*25.00

RECEIVED  
JAN 20 11 55 AM '14

B. J. ...

JAN 20 2014

FY...

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PUHCHO 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:

PAVLINA TODOROVA

(Name of Person)

(Firm/Company)

1801 NE 4<sup>th</sup> AVE, # 204

(Address)

MIAMI, FL 33132

(City/State and Zip Code)

For further information concerning this matter, please call:

PAVLINA TODOROVA

(Name of Person)

at

305 989-9058

(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

PUHCHO LLC

2. The Articles of Organization were filed on 10/06/2010 and assigned  
document number L10000104293

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).

BUSINESS PURPOSE SERVED.

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

PAVLINA TODOROVA

1801 NE 4 AVE

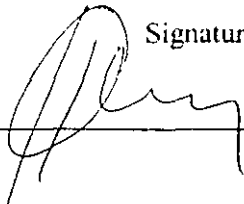
# 204

MIAMI, FL 33132

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



PAVLINA TODOROVA

**FILING FEE: \$25.00**