

L10000104523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

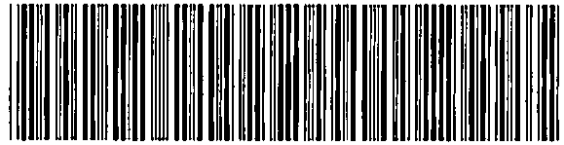
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



200306113862

FILED
17 DEC 27 AM 7:33
FALLS CHURCH, VIRGINIA

17 DEC 27 PM 2:30
FALLS CHURCH, VIRGINIA

J. LEGGETT
DEC 28 2017

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.Incserv.com
e-mail: info@incserv.com

incserv

ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 12/27/2017

PRIORITY Routine

OUR REF # (Order ID#) 620786

ORDER ENTITY

HUMUS CAPITAL PARTNERS LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

HUMUS CAPITAL PARTNERS LLC (FL)

File the attached dissolution document

NOTES:

\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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

1. The name of a limited liability company is
HUMUS CAPITAL PARTNERS LLC

2. The Articles of Organization were filed on 10/06/2010 and assigned
document number L10000104523

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.

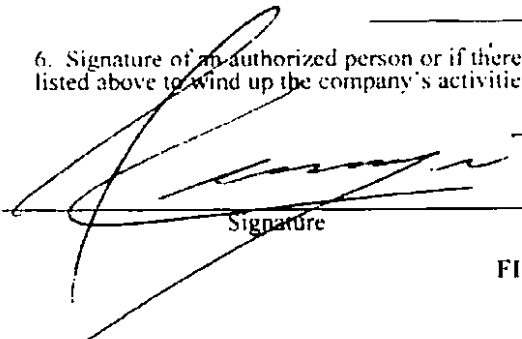
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
The company ceased its activity.

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

6205 BLUE LAGOON DR STE 130

MIAMI, FL 33126

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

LAUZAN, RAMIRO

Printed Name

FILING FEE: \$25.00

17 DEC 27 AM 7:33
FILED