

L 10000109567

(Requestor's Name)

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(Document Number)

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FILED
2014 FEB 18 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
FEB 19 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACUNA SUPPLIERS 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:

JONATHAN ASERRAF

(Name of Person)

(Firm/Company)

7950 NW 53RD STREET, SUITE 337

(Address)

MIAMI, FLORIDA 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

JONATHAN ASERRAF at (305) 799-1576
(Name of Person) (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**

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
ACUNA SUPPLIERS LLC

2. The Articles of Organization were filed on 10/20/2010 and assigned
document number L10000109567

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).
COMPANY IS CLOSING

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

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

ARACELIS ACUNA

ARACELIS ACUNA

FILING FEE: \$25.00