

L10000122422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

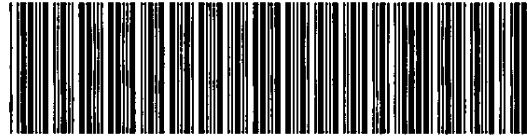
(Document Number)

Certified Copies _____

Certificates of Status ☒

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Office Use Only



200265206822

10/17/14--01014--006 **25.00

EFFECTIVE DATE

10-31-14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 OCT 17 PM 2:25

FILED

OCT 21 2014

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PINECREST FINANCIAL, 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:

Jorge Kalb

(Name of Person)

Atlas One Holdings, LLC

(Firm/Company)

200 So. Biscayne Blvd-Ste 1860

(Address)

Miami, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

Marc Mendez

(Name of Person)

305

960-2152

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/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
14 OCT 17 PM 2:25
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. The name of a limited liability company is

PINECREST FINANCIAL, LLC

2. The Articles of Organization were filed on Nov. 24, 2010 and assigned

document number L10000122422

3. The delayed effective date the dissolution if not effective on the date of filing: 10/31/2014
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

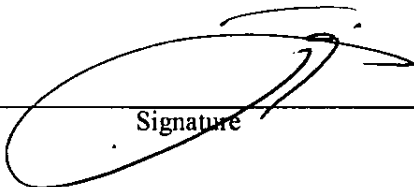
EFFECTIVE DATE
10-31-14

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).

non operational entity

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

Jorge Kalb
Printed Name

FILING FEE: \$25.00