# L11000004086

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status	<del></del>					
Special Instructions to Filing Officer:						





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SECRETARY OF STATE





### **COVER LETTER**

TO:

Registration Section Division of Corporations

SID IFCT.

Pasta Plus 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:

Dominick DiBisceglie						
(Name of Person)						
(Firm/Company)						
21 Persimmon Road						
(Address)						
Ocean, NJ 07712						
(City/State and Zin Code)						

For further information concerning this matter, please call:

Dominick DiBisceglie

...201

739-7592

(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

1.	The name of a limited liability Pasta Plus (LLC)	ty company is			.•				
2. The Articles of Organization were filed on 01/04/11  document number				and assigned					
3.	The delayed effective date th	12/01/13							
<ol> <li>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).</li> <li>Pasta Plus LLC was opened to acquire a business. This business was sold on</li> </ol>									
January 15, 2012. There is need to keep this LLC active as this entity will not be									
	doing business in the future.								
5.	If there are no members, enter activities and affairs:	er the name and add	dress of the person appointed to	wind up the company's					
21 Persimmon Road			ETA	Ē					
		RY C							
				0f S	3 <b>—</b>				
6. ab	Signature of an authorized pove to wind up the company's	erson or if there are s activities and affa	e no members, the signature of irs:						
/	Signature	2.1.	Printed	Name					
	V ginwick I	Apoll	Dominick DiBisceg	glie	_				
		FIL	ING FEE: \$25.00						