

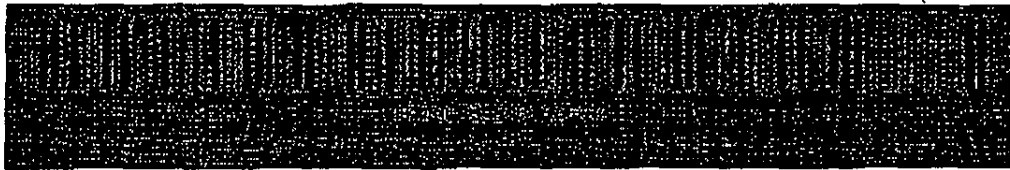
12/23/2014

L 11 0000 11673

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H14000295181 3)))



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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : PAGIO'S & ASSOCIATES, LLC  
Account Number : I20100000043  
Phone : (305)397-8553  
Fax Number : (305)397-8521

LLC DISSOLUTION OR WITHDRAWAL  
INVERSORA F.C. NAPOLI, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

14 DEC 23 AM 10:00

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 DEC 23 AM 8:09

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** INVERSORA F.C. NAPOLI, 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:

FRANCISCO CICCONE D'AMATO  
(Name of Person)

INVERSORA F.C. NAPOLI, LLC  
(Firm/Company)

7910 HARBOR ISLAND DR, STE 909  
(Address)

NORTH BAY VILLAGE, FL 33141  
(City/State and Zip Code)

For further information concerning this matter, please call:

FRANCISCO CICCONE D'AMATO at ( 786 ) 553-0500  
(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

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

1. The name of a limited liability company is  
INVERSORA F.C. NAPOLI, LLC

2. The Articles of Organization were filed on 01/27/2011 and assigned  
document number L11000011673

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2014  
(effective date cannot be prior to or more than 90 days later than date document is received for 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 will be out of business at the end of the year 2014.

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

FRANCISCO CICCONE D'AMATO  
Printed Name

**FILING FEE: \$25.00**

14 DEC 23 AM 8:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**Notice of Limited Liability Company Dissolution**

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: INVERSORA F.C. NAPOLI, LLC

Document number of Limited Liability Company is: L11000011673

Date of dissolution was: 12/31/2014

Description of information that must be included in a written claim:

CONTACT INFORMATION ABOUT ANY CLAIM, AS WELL AS GENERAL

DESCRIPTION ABOUT THE OCCURRENCE.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

7910 HARBOR ISLAND DR, STE 909


NORTH BAY VILLAGE, FL 33141

FILED  
14 DEC 23 AM 8:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

FRANCISCO CICCONE D'AMATO

Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**