# #1/1000018473

(Re	equestor's Name)	
(Address)		
(Ac	idress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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09/20/13--01011--014 \*\*30.00

13 SEP 20 PH 3: 35
SEPREJANT OF STATE

K.SALY EXAMINER SEP 24 2013

### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

JOY STAZ, 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:

LILIANA GOMEZ		
(Name of Person)		
(F: (O)		
(Firm/Company)		
6425 SW 164 AVENUE		
(Address)		
MIAMI, FL 33193		

(City/State and Zip Code)

For further information concerning this matter, please call:

LINA RESTREPO

<sub>...</sub>786

587-3985

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

\$30.00 Filing Fee & Certificate of Status

ρ \$55.00 Filing Fee &
 Certified Copy
 (additional copy is enclosed)

ρ \$60.00 Filing Fee,
 Certificate of Status &
 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

13 SEP 20 PM 3: 35

SEGRETARY OF STATE
FALLAHASSEE, FLORIDA

1. The name of a limited liability company is JOY STAZ, LLC	TALEAHASSEE, FLORIDA
2. The Articles of Organization were filed on 02/11/2	and assigned document number
3. The date the dissolution was approved: 09/01/201	3
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov NO LONGER IN BUSINESS.	d liability company's dissolution pursuant to section
5. CHECK ONE:	
All debts, obligations and liabilities of the lin	nited liability company have been paid or discharged.
☐ Adequate provision has been made for the de	bts, obligations and liabilities pursuant to s. 608.4421.
<ol> <li>All remaining property and assets have been distribute rights and interests.</li> </ol>	ed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the compa	ny in any court.
	tisfaction of any judgment, order or decree which may be
gnatures of the members having the same percentage of n	nembership interests necessary to approve the dissolution
Signature	Printed Name
Lones	LILIANA GOMEZ
Henao	JOMAR HENAO
	N/A
	N/A
	N/A

**FILING FEE: \$25.00**