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. (Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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NER STARRIE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: TWIN HEARTS OM, 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:		
Monica Ferraguti de Viehweg		
(Name of Person)		
(Firm/Company)		
735 Crandon Blvd., #204 (Address)		
(Audiess)		
Key Biscayne, FL 33149		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
rot further information concerning this matter, please can.		
Monica Ferraguti de Viehweg at (305) 301	4389	
(Name of Person) (Area Code & Daytime To	elephone Number)	
Enclosed is a check for the following amount:		
■ \$25.00 Filing Fee and Certificate of Dissolution	of Dissolution &	
Certified Copy (additional c	opy is enclosed)	
MAILING ADDRESS: STREET/COUR		
Registration Section Registration Section		
Division of Corporations P.O. Box 6327 Division of Corpo Clifton Building	rations	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabilit	y company is
Twin Heart	s OM, LLC
2. The Articles of Organization	were filed on2/14/2011 and assigned
document numberL110000)19042
(effective d Note: If the date inserted in the	e dissolution if not effective on the date of filing: N/A ate cannot be prior to or more than 90 days later than date document is received for filing) is block does not meet the applicable statutory filing requirements, this date will not be ve date on the Department of State's records.
4. A description of occurrence t 605.0707, Florida Statutes, (c	hat resulted in the limited liability company's dissolution pursuant to section opy 605.0707 on back cover letter).
Close business	
5. If there are no members, ente activities and affairs:	r the name and address of the person appointed to wind up the company's
	Monica Ferraguti de Viehweg
	735 Crandon Blvd., #204
	Key Biscayne, FL 33149
6. Signature of an authorized pe	erson or if there are no members, the signature of the person appointed and
listed above to wind up the com	pany's activities and affairs:
Moll 15	Monica Ferraguti de Viehweg
Signature	Printed Name
	FILING FEE: \$25.00 \mathbb{R}^{3}