L1100022685

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
		
(D.		
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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JAN 2 1 2014

T. BROWN

COVER LETTER

fo:

Registration Section Division of Corporations

TREVEMED 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 CABREJA

(Name of Person)

(Firm/Company)

2201 SW 2ND AVENUE

MIAMI, FLORIDA 33129

(City/State and Zip Code)

For further information concerning this matter, please call:

FRANCISCO CABREJA at 305 450 9921

(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

•	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY
1.	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY The name of a limited liability company is TREVEMED LLC
2.	The Articles of Organization were filed on 2-23-11 and assigned document number L11000022685
3.	The delayed effective date the dissolution if not effective on the date of filing:
4.	
	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707, Florida Statutes, (copy 605.0707 on back cover letter). INACTIVE
- - - - 5.	
- - - 5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Signature of an authorized person or if there are no members, the signature of the person appointed and listed
- - - 5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

FILING FEE: \$25.00