

LII 000060605

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

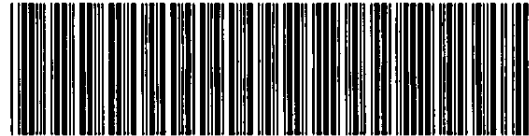
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/20/14--01011--007 **55.00

FILED
14 OCT 20 AM 9:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRET OCT 22 2014

LAW OFFICES OF
JASON B. GILLER, P.A.
701 BRICKELL AVENUE - SUITE 2450
MIAMI, FL 33131
TELEPHONE: (305) 999-1906
FAX: (305) 373-6444
EMAIL: JASON@GILLERPA.COM

October 17, 2014

Registration Section
Division of Corporations
State of Florida
P.O. Box 6327
Tallahassee, FL 32314

Re: AOG-II Holdings, LLC

Gentlemen:

Enclosed please find the following:

1. Cover letter addressed to Registration Section, Division of Corporations;
2. Articles of Dissolution for a Limited Liability Company executed by Antonio Gioia; and
3. Jason B. Giller, P.A. Check No. 1489 in the sum of \$55.00 to cover the filing fee and automatic certificate of dissolution, together with a certified copy of same.

Thank you for your cooperation in this matter.

Very truly yours,



JASON B. GILLER

JBG/mp

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AOG-II HOLDINGS, 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:

Jason B. Giller

(Name of Person)

Jason B. Giller, P.A.

(Firm/Company)

701 Brickell Ave., 24th Floor

(Address)

Miami, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

Terrance J. Mullin

(Name of Person)

at (305) 444-4949

(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**

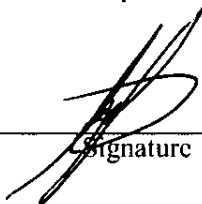
1. The name of a limited liability company is
AOG-II HOLDINGS, LLC
2. The Articles of Organization were filed on 7/13/2011 and assigned
document number L11000080605
3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 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).

Members have determined that it was in the best interests of the company to dissolve.

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

ANTONIO GIOIA

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE FLORIDA