

L11000086891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/18/14--01006--016

TALLAHASSEE, FLORIDA

N. Gulligan MAR 24 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** A G INVEST CO  
(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:

IRYNA CHEREVKO

(Name of Person)

A G INVEST CO

(Firm/Company)

1315 POLK STREET

(Address)

HOLLYWOOD, FL, 33019

(City/State and Zip Code)

For further information concerning this matter, please call:

IRYNA CHEREVKO

(Name of Person)

at ( 647 ) 705-8973

(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

FILE  
2014 MAR 18  
SECRETARY OF  
TALLAHASSEE,

1. The name of a limited liability company is  
A G INVEST CO, LLC

2. The Articles of Organization were filed on 08/01/2011 and assigned  
document number L11000086891

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 fi

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to  
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

VOLUNTARY DISSOLUTION / DECISION AMONG MEMBERS

5. If there are no members, enter the name and address of the person appointed to wind up the compa  
activities and affairs: IRYNA CHEREVKO

6. Signature of an authorized person or if there are no members, the signature of the person appointec  
listed above to wind up the company's activities and affairs:

  
\_\_\_\_\_  
Signature

IRYNA CHEREVKO  
\_\_\_\_\_  
Printed Name

FILING FEE: \$25.00

**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 pay 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 voluntary dissolution.

Name of Limited Liability Company: A G INVEST CO

Document number of Limited Liability Company is: L11000086891

Date of dissolution was: 12/31/2013

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

**THE COMPANY IS NO LONGER IN BUSINESS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FLORIDA  
TALLAHASSEE

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

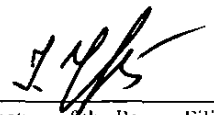
1315 POLK STREET, HOLLYWOOD, FL, 33019

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

IRYNA CHEREVKO

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**