

L110000 89287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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16 FEB 12 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **IVY Biofuels 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:

Leonard Iorio

(Name of Person)

(Firm/Company)

888 Biscayne Blvd Apt. 1010

(Address)

Miami, FL 33132

(City/State and Zip Code)

For further information concerning this matter, please call:

Leonard Iorio

(Name of Person)

at (**305**) **3895777**

(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
IVY Biofuels LLC

2. The Articles of Organization were filed on March 15, 2015 and assigned
document number LI1000089283

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)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

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).

The commodity price for the product sold dropped significantly for a long period of time forcing the company to

operate at a loss. An effort was made to increase profitability and to maintain operations for as long as possible.

Ultimately, the company seized operations due to the financial hardships caused by the market conditions.

5. If there are no members, enter the name and address of the person appointed to wind up the company
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

LEONARD CHRISTIAN IORIO

Printed Name

FILING FEE: \$25.00

RECEIVED
TALLAHASSEE, FLORIDA
FEB 12 AM 8:45
2160

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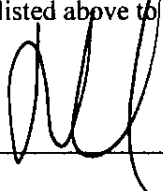
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Signature

LEONARD CHRISTEAN ID210
Printed Name

FILING FEE: \$25.00