# L11000109070

(Req	uestor's Name)				
(Address)					
(Address)					
(City.	/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bus	iness Entity Nar	me)			
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					
:					

Office Use Only



08/17/15--01029--008 \*\*55.00



### **COVER LETTER**

TO: Registration Section
Division of Corporations

Rusca, Aurum USA 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:

Fernando Resendes				
(Name of Person)				
(Firm/Company)				
7925 Founders Circle				
(Address)				
Naples, FL 34104				
(City/State and Zip Code)				

For further information concerning this matter, please call:

David Resendes

<sub>...</sub>239

392-1907

(Name of Person)

(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

FILED 2015 AUG 17 AM 10: 37

1.	The name of a limited liabilit	y company is		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
2.	The Articles of Organization	were filed on 9/23/2011		and assigned	
	document number L11000109	070			
3.	The delayed effective date th (effective date)  Note: If the date inserted in the listed as the document's effective date.	is block does not meet the ap-	plicable statutory filing re	: August 1, 2015 locument is received for filing) equirements, this date will not be	
4.	A description of occurrence t 605.0707, Florida Statutes, (c	hat resulted in the limited opy 605.0707 on back cov	liability company's dier letter).	ssolution pursuant to section	
	NO LONGER IN BUSINESS FOR THE PAST 30 DAY'S				
5.	If there are no members, ente	er the name and address of David Resendes - 7925 Fou			
	activities and affairs:	David Resendes - 7923 Fou	inders entire (vapies, 1 to.	1104	
	ā				
6. lis	Signature of an authorized posted above to wind up the com	erson or if there are no me pany's activities and affai	mbers, the signature or	f the person appointed and	
, ,	Secolo 5		David Resendes		
4	Signature	<u> </u>	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 payment of 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 a voluntary dissolution.

Name of Limited Liability Company: AURUM USA LLC
Document number of Limited Liability Company is: L11000109070
Date of dissolution was: AUGUST 1, 2015
Description of information that must be included in a written claim:
NO LONGER IN BUSINESS FOR THE PAST 30 DAY'S
<del></del>
TALLI AIM
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
7925 Founders Circle Naples FL. 34104
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
David Resendes
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