

L120000000979

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : ALVAREZ, SUAZO & ASSOCIATES
Account Number : I20130000076
Phone : (305) 388-7028
Fax Number : (305) 479-2705

LLC DISSOLUTION OR WITHDRAWAL
EUNIAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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T. HAMPTON

2/12/2014 5:03 PM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **EUNIAL, 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:

Tim Suazo

(Name of Person)

Alvarez, Suazo & Associates

(Firm/Company)

13501 SW 128th St. Suite 202

(Address)

Miami, FL 33186

(City/State and Zip Code)

For further information concerning this matter, please call:

Tim Suazo

(Name of Person)

at (**305**) **388-7028**

(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
EUNIAL, LLC
2. The Articles of Organization were filed on 01/03/2012 and assigned
document number L12000000979
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
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
There are no activities in the company.

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

Printed Name

Emilio A. Poitevin

EMILIO A POITEVIN,

FILING FEE: \$25.00

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