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| (Re | equestor's Name) | | |
|-----------------------------------------|--------------------|-------------|--|
| (Ac | ddress) | | |
| (Ac | ddress) | | |
| (Ci | ty/State/Zip/Phone | e #) | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | usiness Entity Nan | ne) | |
| (Document Number) | | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| | | 3,4/ | |

Office Use Only



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TILEU 1919 JAN - 3 PH 2: 49 SECRETARY OF STATE

LLC Voldis W/Mtice 01-11-19 De December 3, 2018

JOSE ANTONIO PEREZ MARQUIS 14324 SW 96 LANE MIAMI, FL 33186

SUBJECT: PARISI CUCINE E CASA, LLC

Ref. Number: L12000009738

We have received your document for PARISI CUCINE E CASA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell Regulatory Specialist II Supervisor

Letter Number: 518A00024639

JAN -3 AM 11:26

www.sunbiz.org

⊞ision of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO:

Registration Section Division of Corporations

PARISI CUCINE E CASA 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:

JOSE ANTONIO PEREZ MARQUIS

REGISTERED AGENT

14324 SW 96 LANE

(Address)

MIAMI FL 33186

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE A PEREZ MARQUIS at 786

(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: 1

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

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability company is | in the second se |
|-----------|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | PARISI CUCINE E CASA LLC | |
| 2. | The Articles of Organization were filed on 10 | /12/2018 and assigned |
| | document number L12000009738 | <u></u> |
| 3. | | eet the applicable statutory filing requirements, this date will not |
| 4. | A description of occurrence that resulted in th 605.0707, Florida Statutes, (copy 605.0707 on | e limited liability company's dissolution pursuant to section back cover letter). |
| | We have decido | ed to close the |
| | Company because | we are not |
| | We have decide Company because Working with i | 7 . |
| 5. | If there are no members, enter the name and ac | diress of the person appointed to wind up the company's |
| | activities and affairs: | 1 |
| | | 1 |
| | - | <u> </u> |
| | | 1 |
| | | |
| 6. lis | Signature of an authorized person or if there a ted above to wind up the company's activities a | re no members, the signature of the person appointed and affairs: |
| | H | JOSE ANTONIO PEREZ MARQUIS |
| | / Signature | 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: PARIS | I CUCINE E CASA LLC | |
|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|--|
| Document number of Limited Liability Company | is. L12000009738 | |
| Date of dissolution was: 10/12/2018 | | |
| Description of information that must be included in a written claim: | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Mailing address where claims can be sent: (Claim | s cannot be sent to the Division of Corporations) | |
| | : | |
| | | |
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| | | |
| | | |
| A claim against the above named limited liability claim is commenced within 4 years after the filing | company will be barred unless a proceeding to enforce the of this notice. | |
| | | |
| JOSE A PEREZ MARQUS | Signature of the Person Filing | |
| Printed Name of the Person Filing | Signature of the Leison Little | |

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00