Taylor Seay 8004323622

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Division of Corpo Florida Department of State Division of Corporations **Electronic Filing Cover Sheet** ------Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H19000178086 3))) 2873 JUN - 5 H190001780863ABC7 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this . ア page. Doing so will generate another cover sheet. بې To: æ Division of Corporations : (850)617-6383 Fax Number From: Account Name : CAPITOL SERVICES, INC. Account Number : 120160000017 Phone : (855)498-5500 : (800)432-3622 Fax Number ----. LLC DISSOLUTION OR WITHDRAWAL **GIRAINVEST USA, LLC** Certificate of Status Û **""PLEASE PROVIDE THE** ORIGINAL Certified Copy Ð SUBMISSION DATE OF 6/5/19*** Page Count 03 D SCOTT \$25.00 Estimated Charge JUN 1 0 2019 ---------¢ Electronic Filing Menu Corporate Filing Menu Help . ¦ن¦ د

Taylor Seay 8004323622

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ARTICLE'S OF DISSOLUTION | FOR A LIMITED LIABILITY COMPANY

١.	The name of a limited liabilit Girainvest USA, LLC	y company is					_•
2.	The Articles of Organization	were filed on	ry 23, 2012		assigned		
	document number L12000009	897					
5.	The delayed effective date the (effective d <u>Note:</u> If the date inserted in this listed as the document's effective	ate cannot be prior to or is block does not meet	more than 90 days in the applicable state	ter than date documer utory filing requirer	at is receive nents, this	d for filing) date will t) 101 b e
\$.	A description of occurrence t 605.0707, Florida Statutes, (ca	 hat resulted in the li opy 605.0707 on ba	mited liability co ck cover letter).	mpany's dissoluti	on pursua	0.41	tion
	Entity is no longer transaction	ng business in Flor	ida.			نت	T
			······································			UN	
					<u>.</u>	1	1
					171 ·	- Ch	T
						<u>-</u>	- 5
					·.	ىب	
5.	If there are no members, enter activities and affairs:	r the name and addr	ess of the person	appointed to wind	d up the c	ompany's	- 5
							_
							-
							-

<u>1 (cu) en 125 hur</u> Signature

Marijone Ribeiro

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: Girainvest USA,	LLC
Document number of Limited Liability Company is: L12000	009897
Date of dissolution was:	
Description of information that must be included in a written clai	m:
All claims against the assets of the limited liability company r	
include the claim amount, basis and origination date.	
and the state of the second (Claims connet be set	on the Division of Componitions)
Mailing address where claims can be sent: (Claims cannot be ser	
201 South Biscayne Boulevard	
Suite 1200, Room 02	
Miami, Florida 33131	
Attention: Marijone Ribeiro	
A claim against the above named limited liability company will claim is commenced within 4 years after the filing of this notice.	be barred unless a proceeding to enforce the
Marijone Ribeiro	Signature of the Person Filing

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

Printed Name of the Penton Filing