L12000018514

(Re	equestor's Name)			
(Ad	ldress)			
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(Cirl	ty/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
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WAR 2 4 2015 J. HARRIS

COVER LETTER

Registration Section

TO:

Divis	sion of Corporations					
SUBJECT:	A & R GROCERY, LLC					
(Name of Limited Liability Company)						
The enclosed	Articles of Dissolution and fee(s) are submitte	d for filing.				
	all correspondence concerning this matter to the	-				
	MD. M RAHAMAN					
	(Name	of Person)				
	A & R GROCERY, LLC					
	(Firm	(Company)				
	11205 S. ORANGE BLOSSOM	TRAIL				
	(A	ddress)				
	ORLANDO, FL 32837					
	(City/State	and Zip Code)				
For further in	formation concerning this matter, please call:					
ME	D. M RAHAMAN	407 851-5840				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed is a c	heck for the following amount:					
\$25.0	00 Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
	MAILING ADDRESS:	STREET/COURIER ADDRESS:				
	Registration Section Registration Section Division of Corporations Division of Corporations					
	P.O. Box 6327	Clifton Building				
· ·	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 5, 2015

MD. M RAHAMAN 11205 S ORANGE BLOSSOM TRAIL ORLANDO, FL 32837

SUBJECT: A & R GROCERY, LLC Ref. Number: L12000018514

We have received your document for A & R GROCERY, 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):

You failed to make the correction(s) requested in our previous letter.

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.

The effective date must be specific and cannot be prior to the date of filing.

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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 115A00004566

2015 MAR 23 PM 3: 41



February 23, 2015

MD. M RAHAMAN 11205 S ORANGE BLOSSOM TRAIL ORLANDO, FL 32837

SUBJECT: A & R GROCERY, LLC Ref. Number: L12000018514

We have received your document for A & R GROCERY, 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.

The entity's date of incorporation/organization must be listed 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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 715A00003739

2015 MAR 23 PM 3: 41

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	1. The name of a limited liability company A & R GROCERY, LLC	is			· · · · · · · · · · · · · · · · · · ·
2.	2. The Articles of Organization were filed of	on <u>02/07/2012</u>			_ and assigned
	document number L12000018514				
3.	3. The delayed effective date the dissolution (effective date cannot be p	n if not effective on the prior to or more than 90 day	e date o	of filing an date o	; focument is received for filing)
4.	4. A description of occurrence that resulted 605.0707, Florida Statutes, (copy 605.0707)	in the limited liability 07 on back cover letter	compa	ny's di	ssolution pursuant to section
	The reason that we are filing the a	rticle of dissolution	beca	use w	e have closed the
	the business permanently on 12/3	1/2014.			
5.	5. If there are no members, enter the name a activities and affairs: N/A	and address of the pers	son app	ointed	to wind up the company's
6. li:	6. Signature of an authorized person or if the listed above to wind up the company's active	nere are no members, t	he sign	ature o	f the person appointed and
	Signature		MD	M	RAHAMAN I 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: A & R GROCERY, L	LC	_
Document number of Limited Liability Company is:	018514	_
12/31/2011		
Date of dissolution was:		
Description of information that must be included in a written of	claim:	
N/A		_
		_
		_
	,	-
		20
Mailing address where claims can be sent: (Claims cannot be	sent to the Division of Corporation Services	15 HAR 23
N/A	Y OT STA	PM 3: 4
	<u> </u>	_
A claim against the above named limited liability company w claim is commenced within 4 years after the filing of this noti		the the
MD. M RAHAMAN		
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