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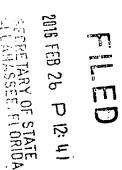
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Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:

Registration Section Division of Corporations

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_ANDO 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:

Rosemary Lindsey

(Name of Person)

Rosemary Lindsey LLC

(Firm/Company

6278 North Federal Highway, #305

(Address)

Fort Lauderdale, FL 33308

(City/State and Zip Code)

For further information concerning this matter, please call:

Rosemary Lindsey

_{3,7}954

771-5906

(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

1.	The name of a limited liabili	ty company is			·	
2.	The Articles of Organization	were filed on 04/11/2	2012	and assigned		
	document number L1200004	9712				
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not listed as the document's effective date on the Department of State's records.					
4.	A description of occurrence 605.0707, Florida Statutes, (that resulted in the lin copy 605.0707 on bac	nited liability company k cover letter).	's dissolution pursuant to	section	
	The affirmative vote of all mem	bers to dissolve the LLC	C has resulted in the disso	dution of the LLC.		
5.	If there are no members, ent activities and affairs:	er the name and addre Rosemary Lindsey	ss of the person appoir	nted to wind up the compa	any's	
		6278 North Federal Highway, #305				
		Fort Lauderdale, FL 3	3308			
	Signature of an authorized pated above to wind up the con			re of the person appointe	 od and	
/	Tournay Du	dsey	Rosemary Lindsey			
	Signature	/		inted Name		
		FILING	G FEE: \$25.00		 m	

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: LANDO LLC	
Document number of Limited Liability Company is: L12000049712	
Date of dissolution was: 04/11/2016	
Description of information that must be included in a written claim:	
Name of claimant	
Address of claimant	
Date on which claim arose	
Nature / detailed description of claim	
Whether claim is secured or unsecured	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Rosemary Lindsey LLC 6278 North Federal Highway, #305 Fort Lauderdale, FL 33308	

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.

Rosemary Lindsey

Printed Name of the Person Filing

Kingang Hindorey
Signature of the Person Filing

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