# L1200051134

(Requestor's Name)				
(Address)				
AIL				
(Business Entity Name)				
(Document Number)				
Special Instructions to Filing Officer:				





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02/03/15--01002--007 \*\*55.90

2015 FEB -9 PM 2: 58

N. Outlean FES 16 2015

### **COVER LETTER**

Divisio	on of Corporations					
SUBJECT:	AND NINJAS 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:						
	Soloman Hussain					
(Name of Person)						
	(Firm/Company)					
	9889 NW 2nd ST					
(Address)						
	Plantation, FL 33324					
(City/State and Zip Code)						
For further info	rmation concerning this matter, please call:					
Soloman Hussain		954 at (	7017070 			
	(Name of Person)	(Area Co	ode & Daytime Telephone Number)			
Enclosed is a che	eck for the following amount:					
	Filing Fee and Certificate of Dissolution	<b>▽</b> \$55.00 Filin	g Fee, Certificate of Dissolution &			

### **MAILING ADDRESS:**

TO:

Registration Section

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

Certified Copy (additional copy is enclosed)

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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			Said i an		
۱.	The name of a limited liability compar	ny is	SECRETARY OF STATE TALLAHASSEE, FLORIDA		
	SAND NINJAS LLC		WENNESS.		
		Anril 16 2012			
2.	The Articles of Organization were file	ed on April 16, 2012	and assigned		
	document number L12000051134				
3.	The delayed effective date the dissolu (effective date cannot	tion if not effective on the date of be prior to or more than 90 days later th	of filing: 3/1/2015 nan date document is received for filing)		
4.	A description of occurrence that resul 605.0707, Florida Statutes, (copy 605.0707)	0707 on back cover letter).	any's dissolution pursuant to section		
Unable to sustain profitable operations					
			<del> </del>		
			<del></del>		
5.	If there are no members, enter the nan	• • • • • • • • • • • • • • • • • • • •	ointed to wind up the company's		
	activities and affairs: Soloma	an Hussain			
	9889 N	IW 2nd ST			
	Plantat	tion, FL 33324			
6. lis	Signature of an authorized person or i sted above to wind up the company's ac	f there are no members, the signature tivities and affairs:	ature of the person appointed and		
		Soloman Hus	sain		
	Signature		Printed Name		
		FILING FEE: \$25.00			