

L12060 124470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

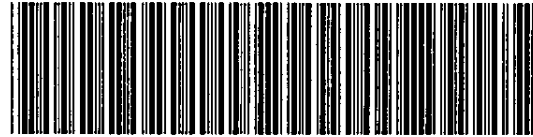
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200256978952

02/27/14--01003--002 **25.00

RECEIVED
FEB 27 2014
11:03 AM

FILED
FEB 27 2014
PM 3:03

FEB 28 2014

T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ganfa Investments, 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:

Lisa Lanza, Esq.
(Name of Person)
Melissa P. Lanza, P.A.
(Firm/Company)
104 Crandon Blvd. Ste 420
(Address)
Key Biscayne, FL 33149
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 FEB 27 PM 3:03

FILED

For further information concerning this matter, please call:

Lisa Lanza at (305) 361-0997
(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**

FILED
2014 FEB 27 PM 3:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
GARUFA INVESTMENTS LLC

2. The Articles of Organization were filed on 09/28/2012 and assigned
document number L12000124470

3. The delayed effective date the dissolution if not effective on the date of filing: _____

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

The company transferred the assets owned in the State of Florida and the company will no longer be used for any business purposed in Florida.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Hernan G. Rouco Oliva

H. Rouco Oliva

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Signature

H. Rouco Oliva

Printed Name

Hernan G. Rouco Oliva

FILING FEE: \$25.00