

**L12000142926**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : EAGLE TAX REPRESENTATION, CORP.  
Account Number : I20070000037  
Phone : (954) 532-3842  
Fax Number : (954) 532-3847

Vol diss  
L12-142926

LLC DISSOLUTION OR WITHDRAWAL  
RIAS BAIXAS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

JAN 21 2015  
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BUREAU OF COMMERCIAL  
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RIAS BAIXAS, 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:

Jose Armando R Martinez

(Name of Person)

Eagle Tax Representation, Corp

(Firm/Company)

5493 Wiles Road - Ste 105

(Address)

Coconut Creek, FL - 33073

(City/State and Zip Code)

For further information concerning this matter, please call:

Paulo Oliveira, EA

(Name of Person)

954

at (

532-3842

) (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  
15 JAN 20 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
RIAS BAIXAS, LLC

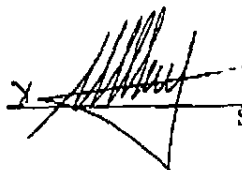
2. The Articles of Organization were filed on 11/13/2012 and assigned  
document number L12000142926

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2014  
(effective date cannot be prior to or more than 90 days later than date document is received for 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).  
Out of Business.

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

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

Jose Armando R Martinez

Printed Name

FILING FEE: \$25.00