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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

### Glades Training Academy & Security Services

(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:

Claudio Tamayo						
(Name of Person)						
Glades Training Aca	ademy					
(Firm/	Company)					
6134 SW 146 Ct						
(Address)						
Miami, FL 33183						
(City/State	and Zip Code)					
For further information concerning this matter, please call:						
Claudio Tamayo	305   383 8363					
(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 liability	ty company is				
	Glades Training Academy & so	ecurity Services				,
2.	The Articles of Organization	were filed on Nov.16,	2012	and assigne	ed .	
	document number 1.1200014	4260	_			
3.	The delayed effective date the feffective of Note: If the date inserted in the listed as the document's effective date.	late cannot be prior to or miles block does not meet th	ore than 90 days later t ie applicable statutor	han date document is rece y filing requirements, t	eived for filin his date will	g) ∣not be
4.	A description of occurrence 605.0707, Florida Statutes, (c	that resulted in the lim copy 605.0707 on back	ited liability compa	any's dissolution pur	suant to se	ction
	The Head Instructor has relocate	ed to another city and it i	s now unable to cond	luct any further instruc	tion	
						- 16 
5.	If there are no members, ento	er the name and addres	s of the person app	pointed to wind up th	e company	/s A
	activities and affairs:	Claudio Tamayo 305 3	83 8363		<u> </u>	_c.
						78
					200	    -   5
						<u>نٽ</u>
6. lis	Signature of an authorized pasted above to wind up the com	erson or if there are no pany's activities and a	members, the sign ffairs:	ature of the person a	ppointed a	nd
			a /	<del></del>		
	1/ Nomuy	<b>)</b> 	C/A	Dio Jam	ay	<u>/</u>
	Signature			Printed Name		

FILING FEE: \$25.00