

L12000148468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

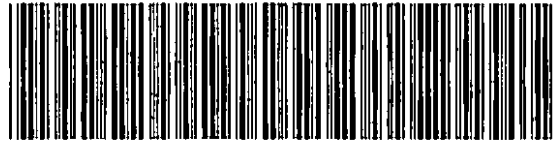
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100310807231

03/23/18--01005--017 \*\*25.00

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2018 MAR 23 AM 9:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. WARREN

MAR 26 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **HINUABA, 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:

**OSCAR GINDIN**

(Name of Person)

**HINUABA, LLC**

(Firm/Company)

**7098 BONITA DRIVE**

(Address)

**MIAMI BEACH, FLORIDA 33141**

(City/State and Zip Code)

For further information concerning this matter, please call:

**OSCAR GINDIN**

(Name of Person)

at **305 868-5365**

(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 company is  
MINUABA, LLC

2. The Articles of Organization were filed on NOVEMBER 27TH, 2012 and assigned  
document number L12000148468

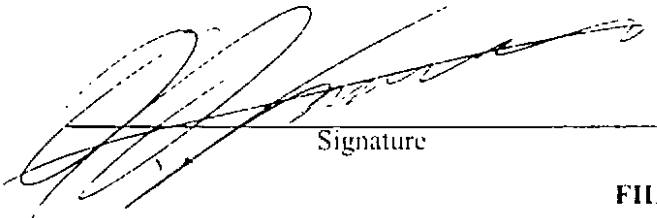
3. The delayed effective date the dissolution if not effective on the date of filing: DECEMBER 31, 2017  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be  
listed as the document's effective date on the Department of State's records.

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 MEMBERS UNANIMOUSLY CONSENTED TO THE DISSOLUTION OF THE LIMITED LIABILITY  
COMPANY.

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

OSCAR GINDIN

Printed Name

**FILING FEE: \$25.00**

2018 MAR 23 AM 9:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## 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: HINUABA, LLC

Document number of Limited Liability Company is: L12000148468

Date of dissolution was: DECEMBER 31, 2017

Description of information that must be included in a written claim:

THE DOCUMENT NUMBER AND A CONCISE SUMMARY OF THE CLAIM.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

OSCAR J. GINDIN  
c/o HINUABA, LLC  
7098 BONITA DRIVE  
MIAMI BEACH, FLORIDA 33141

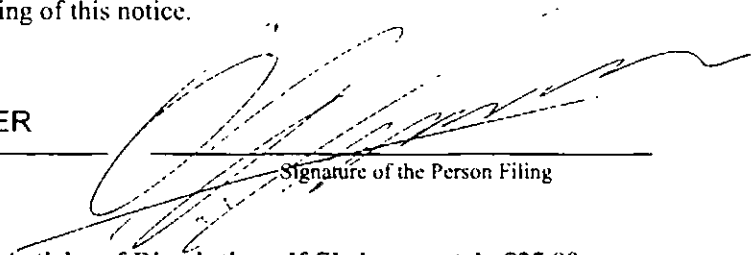
2018 MAR 23 AM 9:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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.

OSCAR J GINDIN, MANAGER MEMBER

Printed Name of the Person Filing

  
Signature of the Person Filing

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