

L12000148493

(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



100259107291

04/18/14--01033--021 **250.00

FILED
2014 APR 18 PM 2:06
CLERK OF STATE
TALLAHASSEE FLORIDA

APR 23 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRAX AVIONICS, 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:

Alex Michelini

(Name of Person)

Trax Capital Management

(Firm/Company)

200 S. Orange Ave. Suite 2800

(Address)

Orlando, Florida 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Alex Michelini

(Name of Person)

407

at (

) 377-0565 x. 704
(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

RECEIVED
TALLAHASSEE, FLORIDA

2014 APR 18 PM 2:06

FILED

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
TRAX AVIONICS, LLC
2. The Articles of Organization were filed on 11/27/2012 and assigned
document number L12000148493
3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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).
Members consent to voluntary dissolution. Entity no longer conducting 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: Bryan L. Brewer
200 S. Orange Ave. Suite 2800
Orlando, Florida 32801

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

Bryan Brewer

Printed Name

FILING FEE: \$25.00

FILED
2014 APR 18 PM 2:06
CLERK OF DISTRICT COURT
JUDICIAL CIRCUIT IN AND FOR
THE SEVENTH JUDICIAL CIRCUIT
IN FLORIDA