Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: JORGE M CASTILLO CPA

Account Number : I20140000067

Phone

: (305)275-0208

Fax Number

: (305)275-0210

LLC DISSOLUTION OR WITHDRAWAL TAMIAMI TRAIL TRANSPORTERS LLC

Certificate of Status	0
Certified Copy	I
Page Count	01
Estimated Charge	\$55.00

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APR 0 7 2015

S. YOUNG

Apr. 6. 2015 3:28PM Connolly Wasserstrom Castillo PA No. 3378 P. 2/4

	COVE	RLETTER		
	tration Section ion of Corporations			
SUBJECT:	famiami Trail Transporters LLC			
SUBSECT: _	(Name of Limite	d Liability Company)	
The enclosed A	Articles of Dissolution and fee(s) are submitt	ed for filing.		
Please return a	Il correspondence concerning this matter to t	he following:		
	Gabriel De Armas			
	(Nam	e of Person)	<u> </u>	<u> </u>
	Tamiami Trail Transporters LLC	;		5
	(Fim	v/Company)	- <u></u>	7.00
	11801 SW 4 Terr			
	(.	Address)		 <u></u> -
	Miamı, FL 33184			
	(City/Sta	te and Zip Code)	·	
For further inf	ormation concerning this matter, please call:			
Jon	ge M Castillo	305 at (275-0208	
 	(Name of Person)	(Area Cod) le & Daytime Telephon	e Number)
Francod (s a ab	seek for the following annount:			
	0 Filing Fee and Certificate of Dissolution		Fee, Certificate of Diss py (additional copy is e	

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

l.	The name of a limited liability company is Tamiami Trail Transporters LLC		
2.	The Articles of Organization were filed on 01/02/2013 and assigned		
	document number <u>L1300000748</u>		
Ι,	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)		
: ,	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). Business ended	on	
		'n	
		i.PR	7
		ಕ್ ಪ್ರ	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	84 :11	
5. is	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:		
1	Gabriel De Armas		
_	Signature Printed Name		

FILING FEE: \$25.00

Apr. 6. 2015 3:29 PM Connolly Wasserstrom Castillo PA No. 3378 P. 4/4 17 15 00 60 847 183

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: Tamiami Trail Transporters LLC
Document number of Limited Liability Company is: L13000000748
Date of dissolution was: 04/03/2015
Description of information that must be included in a written claim:
Provide copy of outstanding invoices and account number
·
ा । जिल्लाका का
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
11801 SW 4 T err
Miami, FL 33184
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.
Gabriel De Armas
Printed Name of the Person Filing Signature of the Person Filing