L13000001389

(R	equestor's Name)	
(Address)		
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(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Business Entity Name)		
(5)	a a compani de Norma de a vi	···
(D	ocument Number))
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		
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SECRETARY OF STATES

BIVISION OF CORPORATIONS

APR - 4 2014 J. HARRIS

COVER LETTER

TO:

Registration Section

Division of Corporations

SUBJECT:

G. L. I GRUPO LOGISTICO INDUSTRIAL

(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:

GUIDO 18 AACS

(Name of Person)

G. L. I GRUPO LOGISTICO INDUSTRIAL

(Firm/Company)

930 BLUE WOOD TERR ACE

(Address)

WESTON, FL. 33327

(City/State and Zip Code)

For further information concerning this matter, please call:

GUIDO ISAACS

at (

6633208

(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 company is GLI GRUPO LOGISTICO NDUSTRIAL LLC
2. The Articles of Organization were filed on JANUARY 3, 2013 and assigned document number L13,000001389
3. The delayed effective date the dissolution if not effective on the date of filing: NA (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).
THE COMPANY WAS NO ABLE TO DEVELOP
ANY BUSINESS, THEREFORE IT WAS DECIDED
TO DISSOLVE IT
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:
GUIDO ISAACS
Signature Printed Name

FILING FEE: \$25.00

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