

L13000020780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF DISTRICT COURT
ALACHUA COUNTY, FLORIDA

2014 MAR 14 AM 11:15

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MAR 17 2014

D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MONGO GRAU 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:

MARK LAFONTAINE, MST

(Name of Person)

LAFONTAINE AND ASSOCIATES, INC.

(Firm/Company)

2755 E. OAKLAND PARK BLVD. STE 300

(Address)

FORT LAUDERDALE, FL 33306

(City/State and Zip Code)

For further information concerning this matter, please call:

MARK LAFONTAINE, MST

(Name of Person)

at (954) 495-4565

(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

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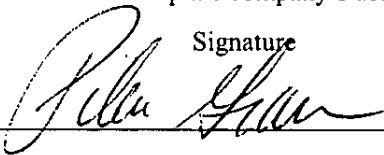
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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
MONGO GRAU, LLC
2. The Articles of Organization were filed on 02/08/13 and assigned
document number L13000020780
3. The delayed effective date the dissolution if not effective on the date of 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).
NO FURTHER BUSINESS ACTIVITY

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: PILAR GRAU
411 SE 5TH STREET
POMPANO BEACH, FL 33060

6. Signature of an authorized person or if there are no members, the signature of the person appointed and
above to wind up the company's activities and affairs:

Signature


Printed Name
PILAR GRAU, MGRM

FILING FEE: \$25.00

FILED
2014 MAR 13 AM 11:15
CLERK OF STATE
ALBANY, NEW YORK