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Office Use Only



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COVER LETTER

TO:

Registration Section Division of Corporations

SHDIECT

REISHA COMPANY, 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:

James M. Soldavini

(Name of Person)

Matthew John Soldavini, P.A.

(Firm/Company)

791 10th St. S., Ste. 301

(Address)

Naples, FL 34102

(City/State and Zip Code)

For further information concerning this matter, please call:

John D'Orazio

_{ar} 412 \ 370-6726

(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.	REISHA COMPANY, LLC			
2.	The Articles of Organization were	filed on 02/13/2013	and assigned	
	document number L13000022941			
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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not 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 505.0707, Florida Statutes, (copy 605.0707 on back cover letter). Pursuant to Florida Statute 605.0707, Reisha Company LLC has voted to dissolve the company due to the			
	fact that the entity can no longer exist	due to current market constraints.		
5.	If there are no members, enter the activities and affairs:	name and address of the person ap	pointed to wind up the company's	
6	Signature of an authorized person	or if there are no members the cia	nature of the person appointed and	
lis	ted above to wind up the company	s activities and affairs:	nature of the person appointed and	
<u>_</u>	700 Om	John D'Orazio		
//	Signature		Printed Name	
		FILING FEE: \$25.00		