

L130000038790

(Requestor's Name)

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2013 JUN 26 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUN 27 2013

EXAMTNER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IFS OMA OLORUN, 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:

Pablo Gaspar Tanayo
(Name of Person)

IFS OMA OLORUN LLC.
(Firm/Company)

3900 West 10 Ct.
(Address)

Tallahassee FL 33012.
(City/State and Zip Code)

For further information concerning this matter, please call:

Pablo Gaspar Tanayo at (786) 399-8631
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

p \$25.00 Filing Fee

p \$30.00 Filing Fee &
Certificate of Status

p \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

p \$60.00 Filing Fee,
Certificate of Status &
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

IFA OMA OLOKUN, LLC.

2. The Articles of Organization were filed on 03/14/2013 and assigned document number

L13000038790

3. The date the dissolution was approved: 06/14/2013

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

Company closed.

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TALLAHASSEE, FLORIDA

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Pamayo

Printed Name

Pablo Gaspar Tamayo



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 14, 2013

PABLO GASPER TAMAPO
1FA OMA OLORUN LLC
3900 WEST 10 COURT
HIALEAH, FL 33012

SUBJECT: IFA OMA OLORUN, LLC
Ref. Number: L13000038790

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for IFA OMA OLORUN, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 313A00015000