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Division of Corporations



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 :

Fax Number

: (850)617-6383

From:

Account Name : QUARLES & BRADY OF TAMPA LLP

Account Number: 120100000038 Phone: (813)387-0285

: (813)387-0285 : (813)387-1800

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PAR 27 PH R: 57
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LLC DISSOLUTION OR WITHDRAWAL PANACHE DESAI IP, LLC

Certificate of Status	0
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Page Count 55	03
Estimated Charge	\$25.00

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Corporate Filing Menu

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The Articles of Organ	ization were filed on	04/23/2013	and assigned
document number	L13000059859		
Note: If the date insen	date the dissolution it not flective dute cunnot be prior to o ted in this block does not mee is effective dute on the Depart	a the applicable statutory this	ling: MARCH 31, 2018 the document is received for filing) ing requirements, this date will not
605.0707, Florida Stat	rrence that resulted in the lates, (copy 605,0707 on botter). TEN CONSENT OF A	ack cover letter).	s dissolution pursuant to section
LIMITED LIABILIT	Y COMPANY.	** ***	÷
			A SE
		\ \ \	AFAS
	ers, enter the name and add	lress of the person appoin	ted to wind up the company's
			ORIGINAL TO A STATE OF THE STAT
If there are no member activities and affairs:			2
activities and affairs:	rized person or if there are he company's activities an	no members, the signatured affairs:	re of the person appointed and
activities and affairs:	rized person or if there are he company's activities an	no members, the signatured affairs:	

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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:	FANACHE DESALIF, ELC
Document number of Limited Liability Company is	
Date of dissolution was: 03/5/2018	·····
Description of information that must be included in	a written claim:
THE LEGAL NAME OF THE CLAIMANT, T	THE CLAIMANT'S ADRESS AND OTHER
CONTACT INFORMATION, THE NATURE	OF THE CLAIM, THE DATE THE CLAIM
OCCURRED, AND THE AMOUNT OF THE	E CLAIM.
	10 y 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Mailing address where claims can be cent If large	<u> </u>
Mailing address where claims can be sent: (Claims	cannot be sent to the Division of Cornerations)
	cannot be sent to the Division of Corporations)
Mailing address where claims can be sent: (Claims 15275 COLLIER BOULEVARD #201/114	cannot be sent to the Division of Corporations)
Mailing address where claims can be sent: (Claims 15275 COLLIER BOULEVARD #201/114	cannot be sent to the Division of Corporations)
Mailing address where claims can be sent: (Claims 15275 COLLIER BOULEVARD #201/114 NAPLES, FL 34119	cannot be sent to the Division of Corporations)
Mailing address where claims can be sent: (Claims 15275 COLLIER BOULEVARD #201/114 NAPLES, FL 34119	cannot be sent to the Division of Corporations)
Mailing address where claims can be sent: (Claims 15275 COLLIER BOULEVARD #201/114 NAPLES, FL 34119 A claim against the above named limited liability of	ompany will be barred unless a proceeding to enforce the
Mailing address where claims can be sent: (Claims 15275 COLLIER BOULEVARD #201/114 NAPLES, FL 34119	ompany will be barred unless a proceeding to enforce the
Mailing address where claims can be sent: (Claims 15275 COLLIER BOULEVARD #201/114 NAPLES, FL 34119 A claim against the above named limited liability of	ompany will be barred unless a proceeding to enforce the

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00