

L13000060032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

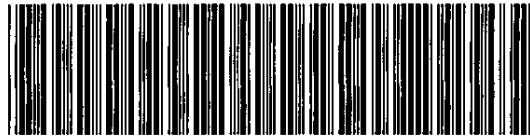
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900280350709

12/29/15--01036--021 **25.00

FILED

2015 DEC 29 P 12:12

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

DEC 31 2015

S MASON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AREA98 USA 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:

GIANNI TONIUTTI

(Name of Person)

TOSOLINI, LAMURA, RASILE & TONIUTTI LLP

(Firm/Company)

407 LINCOLN RD, SUITE 11-C

(Address)

MIAMI BEACH, FL 33139

(City/State and Zip Code)

For further information concerning this matter, please call:

GIANNI TONIUTTI

(Name of Person)

at (305) 534-0420

(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

AREA98 USA LLC

2. The Articles of Organization were filed on 04/24/2013 and assigned

document number L13000060032

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 be 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 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

THE COMPANY HAS NOT BEEN OPERATING FOR THE LAST EIGHTEEN MONTHS AND

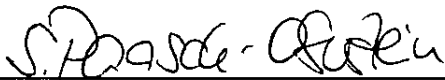
IT HAS SOLD ALL ITS ASSETS.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

SYLVIA PAASCH-OBERSSTEIN

901 NE 79TH STREET, MIAMI FL 33138

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:



Signature

SYLVIA PAASCH-OBERSSTEIN

Printed Name

FILING FEE: \$25.00

FILED
2015 DEC 29 P 12:
SECRETARY OF STATE
ALACHUA COUNTY, FLORIDA