

L1300064291

(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



900256384889

02/11/14--01018--001 **25.00

CLERK OF SUPERIOR COURT
ALABAMA
TALLAHASSEE, FLORIDA

2014 FEB 11 PM 3:42

FILED

FEB 12 2014
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOLE 1703, 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:

Daniel J. Serber

(Name of Person)

Serber & Associates, P.A.

(Firm/Company)

2875 NE 191 Street, Suite 801

(Address)

Aventura, FL 33180

(City/State and Zip Code)

For further information concerning this matter, please call:

Yolanda Fornaris

(Name of Person)

at 305 932-6262

(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

SECRETARY OF STATE
TALLAHASSEE, FL 32301

2014 FEB 11 PM 3:42

FILED

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

1. The name of a limited liability company is

Sole 1703, LLC

2. The Articles of Organization were filed on 05/02/2013 and assigned document number L13000064291.

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).

All the members have consented in writing to the dissolution of the limited liability company as they are no longer conducting Business with the company_____

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

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



Printed Name

Marcelo Cusmai - Member

CLERK OF STATE
TALLAHASSEE, FLORIDA

2014 FEB 11 PM 3:42

FILED