

L17000092468

(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



300258167263

03/26/14--01011--022 **25.00

14 MAR 26 AM 10:43
TALLAHASSEE, FLORIDA

J. Stivers MAR 31 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL TWO- DIMENSIONAL IDENTITY, 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:

Sidney Menezes

(Name of Person)

Choi & Menezes, LLP

(Firm/Company)

1925 Brickell Avenue Suite D-205

(Address)

Miami, Fl. 33129

(City/State and Zip Code)

For further information concerning this matter, please call:

Sidney Menezes

(Name of Person)

at (305) 856-7338

(Area Code & Daytime Telephone Number)

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
GLOBAL TWO-DIMENSIONAL IDENTITY, LLC.
2. The Articles of Organization were filed on JUNE 26, 2013 and assigned
document number L13000092468
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).
The member of the limited liability company have decided that the company shall be dissolved,
and the limited liability company's affairs shall be concluded upon the written consent of all its members.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:
Not applicable

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 Belem Silva

FILING FEE: \$25.00

FILED
JUN 26 2013
TALLAHASSEE, FLORIDA