## 4300098407

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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100307189351

91/02/18--01017--026 \*\*25.00

DESCRIPTION OF CONTRACTORS

K SALY JAN - 3 2018

## **COVER LETTER**

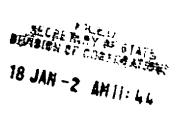
	tion Section n of Corporations	
SUBJECT:	CASUS T NUTSTA (Name of Limited	Liability Company)
	ticles of Dissolution and fee(s) are submitted	
Please return all	correspondence concerning this matter to the	e following:
	KERRY SHEW	JCHUIC of Person)
	(Firm/	Company)
	4338 BLUE HEKON	DEWE ddress)
	PVB FL 32083 (City/State	
For further info	rmation concerning this matter, please call:	
_ <u> </u>	ERRY SHEWCHUK. (Name of Person)	at (310) 600-0960 (Area Code & Daytime Telephone Number)
	eck for the following amount:  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	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



	The name of a limited liability company is  CNSUS T-NUESTMENTS, LLC			
2.	The Articles of Organization were filed on July 10, 2013 and assigned			
	document number <u>L13000098407</u>			
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).			
	Members Consent The LLC is no longer active.			
5	If there are no members, enter the name and address of the person appointed to wind up the company's			
	activities and affairs: KERRY SHEW HUF			
	122A BLUF HERON DR			
	RIB, FL 32087			
í	6. Signature of an authorized person or if there are no members, the signature of the person appointed and isted above to wind up the company's activities and affairs:			
	VENOUS SUBJECTION			
	Signature Printed Name			

**FILING FEE: \$25.00**