

L13000101880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

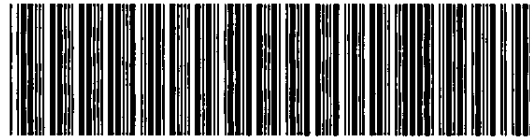
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JAN 24 PM 3:20

FILED

JAN 29 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALL FLAVOR 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:

LYLIAM DE OLIVEIRA ARAUJO

(Name of Person)

ALL FLAVOR LLC

(Firm/Company)

4820 NORTH DIXIE HWY

(Address)

OAKLAND PARK, FL 33334

(City/State and Zip Code)

For further information concerning this matter, please call:

LYLIAM DE OLIVEIRA ARAUJO at 754 200-8239

(Name of Person)

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2014

LYLIAM DE OLIVEIRA ARAUJO
4820 N DIXIE HWY
OAKLAND PARK, FL 33334

SUBJECT: ALL FLAVOR LLC
Ref. Number: L13000101880

We have received your document for ALL FLAVOR LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
Regulatory Specialist III

Letter Number: 914A00000638

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

1. The name of a limited liability company is
ALL FLAVOR LLC

2. The Articles of Organization were filed on 07/17/2013 and assigned
document number L13000101880

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).
Business was sold.

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
Kyham Araujo

Printed Name
LYLIAM DE OLIVEIRA ARAUJO

FILING FEE: \$25.00

FILED
2014 JAN 24 PM 3:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA