

L13000113158

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

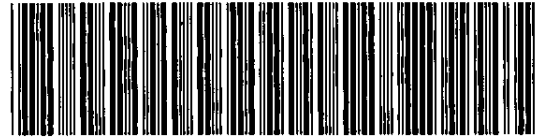
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 JUN 13 PM 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Ouligan JUN 16 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Golden Integrity Services 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:

Yldegarda Benavides
(Name of Person)
Golden Integrity Services LLC
(Firm/Company)
3400 NE 192 Street Apartment 1007
(Address)
Aventura, Florida 33180
(City/State and Zip Code)

For further information concerning this matter, please call:

Yldegarda Benavides at (954) 422-2970
(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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2014 JUN 13 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Golden Integrity Services, LLC

2. The Articles of Organization were filed on August 12, 2013 and assigned
document number L13000113158

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)

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 consent of all 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:

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:

X

Yldegarda Benavides
Signature

Yldegarda Benavides
Printed Name

FILING FEE: \$25.00