

L13000123415

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2019 DEC 26 AM 11:15
TALLAHASSEE, FLORIDA

FILED

K. SALY
DEC 27 2019

FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE DISSOLUTION FOR:

RONPOPE FORTRAN, LLC

PLEASE RETURN A STAMPED COPY & A CERTIFICATE OF DISSOLUTION

CHECK# 8545 FOR: \$75.00 (\$25.00 for this filing)

*** PLEASE NOTE EFFECTIVE DATE: 12/29/2019 ***

THANK YOU!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ronpope Fortran, 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:

Oscar I. Alfonso, Esq.

(Name of Person)

Oscar I. Alfonso & Associates, P.A.

(Firm/Company)

1000 Brickell Avenue, Suite 410

(Address)

Miami, Florida 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

Oscar I. Alfonso

(Name of Person)

305

376-0700

at ()

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
2013 DEC 26 AM 11:15
CLERK OF THE COURT
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Ronpope Fortran, LLC

2. The Articles of Organization were filed on 08/30/2013 and assigned

document number L13000123415

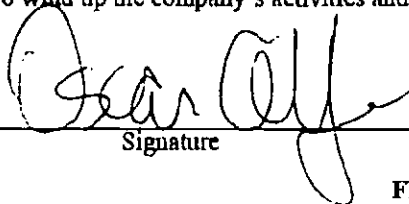
3. The delayed effective date the dissolution if not effective on the date of filing: 12/29/19
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, 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).

The consent of all the 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:



Signature

Oscar I. Alfonso

Printed Name

FILING FEE: \$25.00