117000127904

(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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July 18, 2014

CSC

RESUBMT
Please give original
submission date as file date.

SUBJECT: PISOS E ACUSTICOS, LLC

Ref. Number: L13000123904

We have received your document for PISOS E ACUSTICOS, 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):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 314A00015450





ACCOUNT NO. : I2000000195

REFERENCE : 807720 7953171

AUTHORIZATION :

COST LIMIT :

ORDER DATE: September 17, 2013

ORDER TIME : 12:06 PM

ORDER NO. : 807720-010

CUSTOMER NO: 7953171

DOMESTIC FILINGS

NAME: PISOS E ACUSTICOS, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY ___ PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT# 62925

EXAMINER'S INITIALS:

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited lis	ability company is	
PISOS E ACUSTICO	OS, LLC	
2. The Articles of Organiza	ation were filed on 09-03-2013	and assigned
document number L13	000123904	
3. The delayed effective da (effec	te the dissolution if not effective on the date of fili tive date cannot be prior to or more than 90 days later than da	ng:te document is received for filing)
605.0707, Florida Statute	nce that resulted in the limited liability company's s, (copy 605.0707 on back cover letter).	dissolution pursuant to section
The entity was incorr	ectly filed as a Limited Liability Company.	
5. If there are no members,	enter the name and address of the person appointe	d to wind up the company's
activities and affairs:	MR. JOSE M. CAMPOS	
	571 SW 141ST AVE	
	Apartment N306	7
	Pembroke Pines, FL 33027	
5. Signature of an authorize isted above to wind up the o	ed person or if there are no members, the signature company's activities and affairs:	of the person appointed and
۸	acr	
To Mile	JOSE M. CAMPO	os
Signature	Print	ed Name
9	FILING FEE: \$25.00	