L13000124245

(Requestor's Name)		
(Address)		
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(Business Entity Name)		
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T. BROWN

Marlene Leon-Rubido Attorney At Law

Coral Way Law Center 6780 Coral Way Miami, Florida 33155 email: marlenerubido@earthlink.net Tel: (305) 596-2211 Tel: (305) 261-4000 Fax:(305) 669-9202

February 28, 2014

Division of Corporation Florida Department of State P.O. Box 6327 Tallahassee, Florida 32314

Re: Articles of Dissolution of Wild Steps, LLC

Dear Sir or Madam:

Enclosed are the Articles of Dissolution for the above referenced Florida Limited Liability Company Also enclosed is a check in the amount of \$25.00, representing the filing fee for each Article, payable to the "Department of State"

Thank you for your courtesies and if you have any questions regarding the above, please "do not hesitate to contact the undersigned.

Sincerely,

Marlene Leon-Rubido, Esquire

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

WILD STEPS, 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:

(Name of Person)

Marlene Leon Rubido, Esq.

(Firm/Company)

6780 Coral Way

(Address)

Miami, Florida 33155

(City/State and Zip Code)

For further information concerning this matter, please call:

Marlene Leon Rubido

.,305

596-2211

(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 A LIMITED LIABILITY COMPANY

SECRETARIS PH 1: 10 1. The name of a limited liability company is WILD STEPS, LLC 2. The Articles of Organization were filed on 09/03/2013____ and assigned document number L13000124245 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). Agreement of all Members 5. If there are no members, enter the name and address of the person appointed to wind up the company's David Guenoun activities and affairs: 1760 NW 23 Street Miami, Florida 33142 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: Printed Name **David Guenoun**

FILING FEE: \$25.00