

L13060136682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

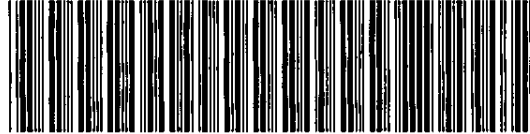
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 JAN 20 PM 4:06  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

JAN 30 2015  
D. BRUCE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SPINGARN & MARKS INTERNATIONAL CONSULTING 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:

FREDDY MANTIUA  
(Name of Person)

SPINGARN & MARKS INTERNATIONAL CONSULTING LLC  
(Firm/Company)

6330 ARAGON WAY UNIT 305  
(Address)

FORT MYERS, FL, 33966  
(City/State and Zip Code)

For further information concerning this matter, please call:

FREDDY MANTIUA at (904) 412 2884  
(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

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

1. The name of a limited liability company is

SPINGARN & MARKS INTERNATIONAL CONSULTING LLC

2. The Articles of Organization were filed on 09/06/2013 and assigned

document number L13000126082

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).

RESOLUTION MADE ON LAST MEETING HELD

ON 12/31/2014, THE MEMBERS DECIDED TO

VOLUNTARILY DISSOLVE THE COMPANY.

VOLUNTARY DISSOLUTION

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 as listed above to wind up the company's activities and affairs:

  
Signature

FREDDY MANTUA  
Printed Name

**FILING FEE: \$25.00**

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TALLAHASSEE, FLORIDA

**FILED**

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: SPINGARN & MARKS INTERNATIONAL CONSULTING LLC

Document number of Limited Liability Company is: L13000126082

Date of dissolution was: 01/01/2015

Description of information that must be included in a written claim:

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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

6330 ARAGON WAY UNIT 305  
FORT MYERS, FL, 33966  

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TALLAHASSEE FLORIDA

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Freddy Manuwa  
Printed Name of the Person Filing

[Signature]  
Signature of the Person Filing