

L13000 133 4

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

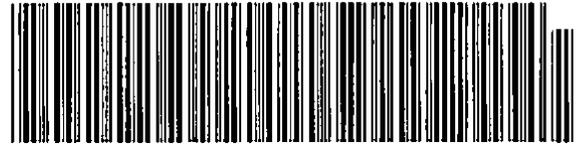
(Business Entity Name)

(Document Number)

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2019 AUG 21 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

AUG 21 2019  
C. Kinsey



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 12, 2019

CUKI INVESTMENTS, LLC  
2600 S DOUGLAS RD STE 913  
CORAL GABLES, FL 33134

SUBJECT: CUKI INVESTMENTS, LLC  
Ref. Number: L13000133495

We have received your document for CUKI INVESTMENTS, 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):

Section 607.1407 or 617.104, Florida Statutes, requires a Notice of Corporate Dissolution contain a description of the information that must be included in a claim.

Please return 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) 245-6050.

Catherine M Wood  
Regulatory Specialist II

Letter Number: 619A00016536

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*Please note that there are no claims.*

*Maint.*

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

1. The name of a limited liability company is  
CUKI INVESTMENTS, LLC

2. The Articles of Organization were filed on September 20, 2013 and assigned  
document number L13000133495

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)  
**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 company has been dissolved

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:

Maria Antonietta Tio  
Signature

MARIA ANTONIETA TIO  
Printed Name

**FILING FEE: \$25.00**

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SEC. OF STATE  
TALLAHASSEE, FL