

01/14/2033 0:28

0273 P 001/005

**L130000136691**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

**LLC DISSOLUTION OR WITHDRAWAL  
JUSQUIN SA LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

15 MAR -5 AM 10:00  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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March 5, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

JUSQUIN SA LLC  
14335 SW 120 STREET, STE. 211  
MIAMI, FL 33186

SUBJECT: JUSQUIN SA LLC  
REF: L13000136691

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

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 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.

Tammy Hampton  
Regulatory Specialist III

FAX Aud. #: H15000054333  
Letter Number: 415A00004508

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15 MAR -5 AM 10:00  
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INFORMATION SERVICES



March 4, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

JUSQUIN SA LLC  
14335 SW 120 STREET, STE. 211  
MIAMI, FL 33186

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Tammy Hampton  
Regulatory Specialist III

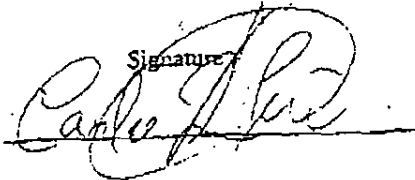
FAX Attn. #: H15000054333  
Letter Number: 915A00004393

REC-11  
15 MAR -5 AM 10:00  
BUREAU OF PROFESSIONAL  
REGISTRATION SERVICES

H15000054333

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is  
JUSQUIN SA LLC
2. The Articles of Organization were filed on 09/26/13 and assigned  
document number L13000136691
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).  
DONT WANT TO PAY penalty
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  


Carlos R. Pera  
Printed Name

FILING FEE: \$25.00

FILED  
15 MAR -5 AM 7:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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