## <u>LI3000/40542</u>

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	

۲

1



08/07/20--01015--002 \*\*50.00



SEP 2 9 2020

## COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS SOLIS

Name of Person

TAP HOUSE PLANTATION, LLC

Firm/Company

201 LA VEREDA ROAD

Address

PASADENA, CA 91105-1227

City/State and Zip Code

carlossolis1000@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLOS SOLIS

793-8334

626

Name of Person

\_ at (\_\_\_\_\_\_) \_\_\_\_\_\_Area Code \_\_\_\_\_\_Daytime Telephone Number

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E141 (2/14)

## STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination: 

SECOND: The Florida Document number of the limited liability company is:

THIRD: The date of filing of the initial articles of organization is:

FOURTH: The date of filing of the dissolution is:

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

gnature of Authorized Representative

CARLOS SOLIS

Typed or printed name of signature

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)



CR2E141 (2/14)