

L13000174072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUL - 8 2014

CLERK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIMA EXPRESS AUTO TRANSPORT 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:

ALBA E VIVAR

(Name of Person)

MIAMI DISPATCH & CARRIER SERVICES

(Firm/Company)

8040 NW 95TH ST STE 106

(Address)

HIALEAH GARDENS, FL 33016

(City/State and Zip Code)

For further information concerning this matter, please call:

ALBA E VIVAR

(Name of Person)

at (305) 822-0255
(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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TALLAHASSEE, FLORIDA

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

1. The name of a limited liability company is
LIMA EXPRESS AUTO TRANSPORT LLC
2. The Articles of Organization were filed on 12/18/2013 and assigned
document number L13000174072
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).
OUT OF BUSINESS
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

ERICK LIMA

Printed Name

FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 25, 2014

ALBA E. VIVAR
MIAMI DISPATCH & CARRIER SERVICES
8040 NW 95TH STREET, SUITE 106
HIALEAH GARDENS, FL 33016

SUBJECT: LIMA EXPRESS AUTO TRANSPORT LLC
Ref. Number: L13000174072

We have received your document for LIMA EXPRESS AUTO TRANSPORT LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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. The proper form is enclosed for your convenience.

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.

Barbara Bostick
Regulatory Specialist II

Letter Number: 914A00013789

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TALLAHASSEE, FLORIDA