14000007380

(Re	questor's Name)	
(Ad	dress)	
		<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Ďo	cument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

то:	Registration Section Division of Corporations		
1 (1:12	CCT: TALIA INDEPENDENT MIAMI, LL	С	
3000		nited Liability C	ompany
	closed Statement of Revocation of Dissolutio ted for filing.	n for Florida Lin	nited Liability Company and fee(s) are
Please	return all correspondence concerning this man	tter to:	
Christ	opher A. DiSchino, Esq.		
	Contact Person		
DiSch	ino & Schamy, PLLC		
	Firm/Company		_
4770	Biscyane Blvd., Suite 1280		
	Address		
Miam	i, FL 33137		
•	City, State and Zip Code		_
	opher@dsmiami.com		
E-	mail address: (to be used for future annual rep	ort notification)	
For fu	ther information concerning this matter, pleas	ic call:	
Christ	opher DiSchino	at (561	248-9478
	Name of Contact Person	Area Cod	le Daytime Telephone Number

ž

STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS: Registration Section
Division of Corporations
P. O. Box 6327

Tallahassee, FL 32314

CR2E132 (10/15)

STATEMENT OF REVOCATION OF DISSOLUTION FOR FLORIDA LIMITED LIABILITY COMPANY

Pursuant to section 605.0708, Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution.

1.	The name of the company is:
2.	The document number of the company is
3.	The effective date the Dissolution was filed is
4.	The revocation of dissolution was authorized on
5.	A copy of the Articles of Dissolution is attached. Signature of person authorized to submit the revocation of dissolution

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CR2E132 (10/15)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1	The name of a limited liability company is ITALIA INDEPENDENT MIAMI LLC		
2.	. The Articles of Organization were filed on JANUARY 14, 2014 and assigned		
	document number L14000007380		
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 listed as the document's effective date on the Department of State's records.	ot be	
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to secti 605.0707. Florida Statutes, (copy 605.0707 on back cover letter).	on	
	UNANIMOUS WRITTEN CONSENT OF THE MEMBERS		
		3	اط اططر
		y J	LEGAR.
	. 198 Tig	PX 5:	<u>'</u>
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	56	
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:		
9	ramfaulier Giovanni Carlino		
	Signature Printed Name		

FILING FEE: \$25.00

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: ITALIA INDEPENDENT MIAMI LLC
Document number of Limited Liability Company is: L14000007380
Date of dissolution was: APRIL 1, 2019
Description of information that must be included in a written claim:
1) NAME AND MAILING ADDRESS OF THE PERSON MAKING THE CLAIM;
2) DESCRIPTION OF THE CLAIM AND EVENTS GIVING RISE TO THE CLAIM;
3) STATEMENT OF THE AMOUNT OF THE CLAIM, S
4) ANY OTHER RELEVANT INFORMATION REGARDING THE CLAIM. 3
P X
45. W
Mailing address where claims can be sent (Claims cannot be sent to the Division of Cornerations)

ATTN: DISCHINO & SCHAMY, PLLC 4770 BISCAYNE BLVD., SUITE 1280 MIAMI, FLORIDA 33137

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.

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00