

L140000 23698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

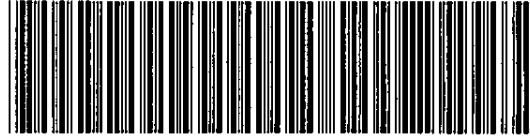
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/03/15--01045--010 **25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED FEB 11 2015

2/28

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Recycling Solutions of America 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:

Oscar Tabares III

(Name of Person)

(Firm/Company)

9590 NW 89 AVE

(Address)

Medley, FL 33178

(City/State and Zip Code)

For further information concerning this matter, please call:

Oscar Tabares III

(Name of Person)

305

793-9053

(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:

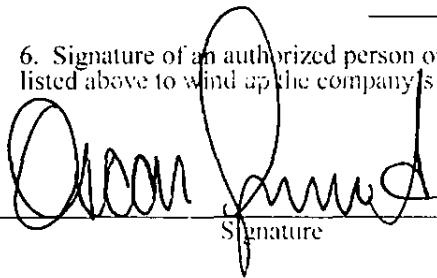
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of a limited liability company is
Recycling Solutions of America LLC
2. The Articles of Organization were filed on 2/11/14 and assigned
document number L14000023698
3. The delayed effective date the dissolution if not effective on the date of filing: 2/28/15
(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).
Irreconcilable Differences

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

Oscar Tabares III

Printed Name

FILING FEE: \$25.00

15 FEB +3 AM 8:56
CLERK OF STATE
ALLAHBACH FLORIDA