

L14000030208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

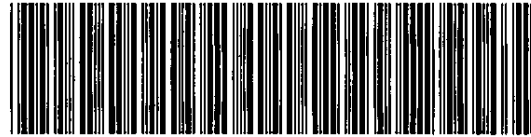
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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CLERK OF STATE
TALLAHASSEE, FLORIDA

JUN 24 2014

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASYR 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:

Antonio J. Socorno Marin
(Name of Person)

ASYR LLC
(Firm/Company)

8900 NW 107 CT unit 108
(Address)

Miami FL 33178
(City/State and Zip Code)

For further information concerning this matter, please call:

Antonio J. Socorno Marin at (786) 608-5632
(Name of Person) (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 FL 32301

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

1. The name of a limited liability company is

ASYR, LLC

2. The Articles of Organization were filed on 2-21-14 and assigned

document number L14000030208

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).

No Activity

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

Antonio J. Socorro Marin
Printed Name

FILING FEE: \$25.00

2014 JUL 23 PM 1:46
CLERK OF COURT
JUL 23 2014
CLERK OF COURT