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(Requ	uestor's Name)
(Addr	ress)
(Addr	ress)
(City/	/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busi	ness Entity Name)
(Docu	ument Number)
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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: Green 4 Life Land SCAPING (Name of Limited Liability Company)
	(Name of Limited Liability Company)
The encl	losed Articles of Dissolution and fee(s) are submitted for filing.
Please ro	eturn all correspondence concerning this matter to the following:
	Claribel Moreno
	(Name of Person)
	(Firm/Company)
	481 NW 30 ST APTU (Address)
	(Address)
	MIAMI FLUNDA 33127
	(City/State and Zip Code)
For furth	her information concerning this matter, please call:
	Claribel Moreno at 786 553 5777 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed	l is a check for the following amount:
Ø	\$25.00 Filing Fee and Certificate of Dissolution

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
	Green 4 UFE LandScaping.
2.	The Articles of Organization were filed on 2 · 28 · 14 and assigned
	document number 440000 34381
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 be listed as the document's effective date on the Department of State's records.
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).
	Didn't when through with the business
	no funds.
	SEC.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	RA LA COMPANIENTE DE LA COMPANIENTE DEL COMPANIENTE DE LA COMPANIENTE DEL COMPANIENTE DE LA COMPANIENT
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
(Claribet moreno
	Signature Printed Name

FILING FEE: \$25.00