

L14000040631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

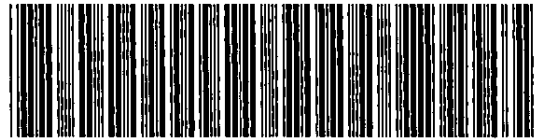
(Business Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
17 MAY 12 PM 3 18

M. MILLIGAN

MAY 16 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DRIM FRANCHISING 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:

Diogo Esteves

(Name of Person)

DRIM FRANCHISING LLC

(Firm/Company)

6925 Lake Ellenor Dr. Suite 117

(Address)

Orlando, FL 32809

(City/State and Zip Code)

For further information concerning this matter, please call:

Diogo Esteves

(Name of Person)

at ( 407 ) 544-3244

(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**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
17 MAY 12 PM 3:10

1. The name of a limited liability company is  
DRIM FRANCHISING LLC

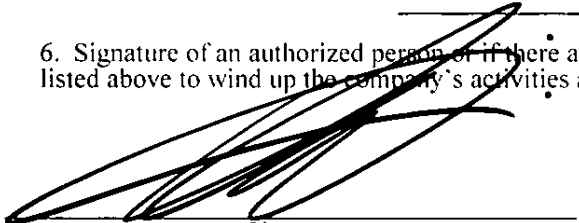
2. The Articles of Organization were filed on 03/11/2014 and assigned  
document number L14000040631

3. The delayed effective date the dissolution if not effective on the date of filing: 04/28/2017  
(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).  
COMPANY HAS NOT HAD ENOUGH BUSINESS TO KEEP OPERATING. BOTH PARTNERS DECIDED  
IT WOULD BE BEST TO DISSOLVE THE COMPANY IN COMMON AGREEMENT.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Diogo Esteves  
6925 LAKE ELLENOR DR. SUITE 117, ORLANDO, FL 32809

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

Diogo Esteves  
\_\_\_\_\_  
Printed Name

**FILING FEE: \$25.00**