L14000011561

(Requestor's Name)				
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PICK-UP	WAIT	MAIL		
(Bi	usiness Entity Nam	e)		
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Special Instructions to	Filing Officer:			
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Office Use Only



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SECRETARY OF STATE

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COVER LETTER

Division	Division of Corporations					
SUBJECT: SI	SHEMAS FLORIDA LLC					
(Name of Limited Liability Company)						
The enclosed Ar	rticles of Dissolution and fee(s) are submitted for filing	ng.				
Please return all correspondence concerning this matter to the following:						
	INNA VORONA					
	(Name of Person)					
	CORONA TAX SERVICES INC					
	(Firm/Company)					
	3363 NE 163RD STREET STE 506					
	(Address)					
	N. MIAMI BCH, FL 33160					
(City/State and Zip Code)						
For further information concerning this matter, please call:						
	at (_	(Area Code & Daytime Telephone Number)				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed is a chec	ck for the following amount:					
√ \$25.00 H	Filing Fee and Certificate of Dissolution \$5	55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

TO:

Registration Section

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



May 1, 2015

INNA VORONA CORONA TAX SERVICES INC 3363 NE 163RD STREET STE 506 N. MIAMI BEACH, FL 33160

SUBJECT: SHEMAS FLORIDA LLC

Ref. Number: L14000071561

We have received your document for SHEMAS FLORIDA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete #4 of the dissolution.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 415A00009023

ARTICLES OF DISSOLUTION FOR ... A LIMITED LIABILITY COMPANY

FILED 2015 MAY 19 PM 4 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA

	The name of a limited liability comp	pany is		TALLAHASSEE, FLU
2. <i>'</i>	The Articles of Organization were fi	led on 05/02/2014	1	and assigned
	document number L1400007156	1		
3. '	The delayed effective date the dissolution (effective date cannot	ution if not effective to be prior to or more tha	e on the date of filing n 90 days later than date	g: document is received for filing)
	A description of occurrence that resions.05.0707, Florida Statutes, (copy 60:	5.0707 on back cove	r letter).	aesiVity
-	any assers			
	If there are no members, enter the na	ame and address of t	he person appointed	to wind up the company's
6. : list	Signature of an authorized person or ed above to wind up the company's	if there are no mem activities and affairs	bers, the signature o	f the person appointed and
	Munyaga Signature		Anna S	hipulejon Name