

4400007822

(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



400282752004

03/03/16--01015--016

03/03/16--01015--016

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAR -3 PM 2:34

MAR 04 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AGUILAUGUSTINE CONCRETE 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:

AGUSTIN ONTIVEROS JR

(Name of Person)

AGUILAUGUSTINE CONCRETE LLC

(Firm/Company)

3305 GLORIA AVE

(Address)

PLANT CITY FL 33563

(City/State and Zip Code)

For further information concerning this matter, please call:

AGUSTIN ONTIVEROS JR at 813 478-5544

(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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 MAR -3 PM 2:36

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

1. The name of a limited liability company is
AGUILAUGUSTINE CONCRETE LLC

2. The Articles of Organization were filed on 02/04/2016 and assigned
document number L14000078722

3. The delayed effective date the dissolution if not effective on the date of filing: 02/04/2016
(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).
THE LLC HAS NEVER BEEN AND ITS NOT USED.

5. If there are no members, enter the name and address of the person appointed to wind up the company
activities and affairs: AGUSTIN ONTIVEROS
3305 GLORIA AVE
PLANT CITY, FL 33563
ACTIVITIES AFFAIR: CONSTRUCTION SUBCONTRACTOR

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

AGUSTIN ONTIVEROS JR

Printed Name

FILING FEE: \$25.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

16 MAR -3 PM 2:34