

L14 000 087056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

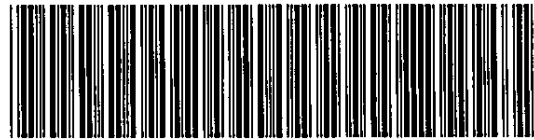
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16 DEC 30 PM 1:23

FILED
CLERK OF STATE
JANUARY 1, 2017

DEC 30 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WEBERMAN TRADITIONAL FOODS, 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:

DAVID WEBERMAN

(Name of Person)

WEBERMAN TRADITIONAL FOODS, LLC

(Firm/Company)

330 NE 59th Street

(Address)

Miami, Florida 33137

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID WEBERMAN

(Name of Person)

at (305) 733-5024

(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**

1. The name of a limited liability company is
WEBERMAN TRADITIONAL FOODS, LLC
2. The Articles of Organization were filed on MAY 23RD, 2014 and assigned
document number L14000087056
3. The delayed effective date the dissolution if not effective on the date of filing: DECEMBER 31ST, 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).
ALL THE MEMBERS HAVE CONSENTED TO DISSOLVE THE CORPORATION WITH AN EFFECTIVE
DATE OF DECEMBER 31ST, 2016.

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

DAVID WEBERMAN

Printed Name

FILING FEE: \$25.00

FILED
DEPT. OF STATE
16 DEC 30 PM 1:23
TALLAHASSEE, FLORIDA