

L14 000093804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

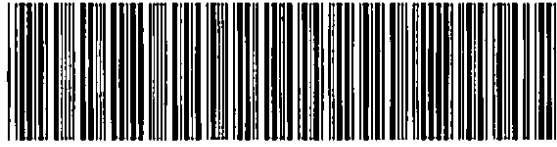
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08/07/2020 01:31:31

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2020 AUG -7 PM 1:31
CLERK OF STATE
TALLAHASSEE, FL

08/07/2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHIMAO INTERNATIONAL LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIA MATHEUS

(Name of Person)

SHIMAO INTERNATIONAL LLC

(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

MARIA MATHEUS
(Name of Person)

220 1177868
(Area Code & Domestic Telephone Number)

Enclosed is a check for the following amount: EMAIL - CAROLINA@SHI-MAO.COM
CAROLINA@SHI-MAO.COM
* \$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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 510
Tallahassee, FL 32303

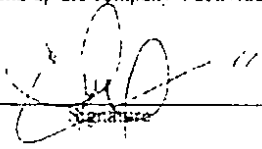
ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is SILHAC INTERNATIONAL LLC.
2. The Articles of Organization were filed on 06-11-2014 and assigned document number: L14000093804
3. The delayed effective date the dissolution if not effective on the date of filing: DEC 31, 2019
(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).

NO OPERATIONS.

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

MAURA MATHES

Printed Name

FILING FEE: \$25.00

FILED
2020 AUG - 7 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FL