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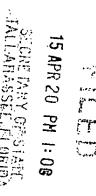
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Doc	cument Number)					
Certified Copies	Certificates	s of Status				
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Special Instructions to Filing Officer:						

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations					
Leimm LLC SUBJECT:					
(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 PATINO					
(Name of Person)					
(Firm/Company)					
1830 N 50th AVE					
(Address)					
HOLLYWOOD, FL 33021					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
DAVID PATINO 954 649-9490					
(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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is LEIMM LLC						
2.	The Articles of Organizatio	on were filed on AUGUS	ST 11 2014	and assigned			
	document number L14000	0125461	_				
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing)						
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).						
	LACK OF BUSINESS						
5.	If there are no members, enter the name and address of the person appointed to wind up the company's						
activities and affairs:	activities and affairs:	DAVID PATINO		R 20 F			
	1830 N 50th AVE						
		HOLLYWOOD, FL	33021				
6. lis	Signature of an authorized pated above to wind up the con	person or if there are no r mpany's activities and aff	nembers, the signature of airs:	the person appointed and			
	(Retail		DAVID PATINO				
	Signature		Printed	Name			

FILING FEE: \$25.00