# 1400132247

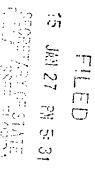
| (Requestor's Name)                      |  |  |  |
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| (Addross)                               |  |  |  |
| (Address)                               |  |  |  |
| (Address)                               |  |  |  |
|   |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |
|   |  |  |  |
| (Business Entity Name)                  |  |  |  |
| (Document Number)                       |  |  |  |
|   |  |  |  |
| Certified Copies Certificates of Status |  |  |  |
|   |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
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Office Use Only



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APR 21 2015 S. YOUNG



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 5, 2015

RAMIRO O CAPACHO 1598 NE 176TH ST MIAMI, FL 33162

SUBJECT: CAPITAN CAPACHO LLC

Ref. Number: L14000132247

We have received your document for CAPITAN CAPACHO LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 315A00002480

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#### **COVER LETTER**

| TO: Registration Section Division of Corporations                |   |  |  |  |
|--|---|--|--|--|
| SUBJECT CARACHA /  | 1 <i>C</i>  |  |  |  |
| SUBJECT: CAPITAN CAPACHO LLC (Name of Limited Liability Company) |   |  |  |  |
|  |   |  |  |  |
| The enclosed Articles of Dissolution and fee(s) are submitted    | d for filing.   |  |  |  |
| Please return all correspondence concerning this matter to the   | e following:  |  |  |  |
|  |   |  |  |  |
| RAMIRO D. CA   | of Person)  |  |  |  |
| CAPITAN CAPACHO LLC (Firm/Company)                               |   |  |  |  |
| (Firm/Company)   |   |  |  |  |
| 1598 NE 176  | <sup>74</sup> 57  |  |  |  |
| (A   | ddress)   |  |  |  |
| Miami FL   | 33/62   |  |  |  |
| (City/State  | and Zip Code)   |  |  |  |
| For further information concerning this matter, please call:     |   |  |  |  |
| RAMIRO D. CAPACHO  | at (784) 709-7040 (Area Code & Daytime Telephone Number)  |  |  |  |
| (Name of Person)   | (Area Code & Daytime Telephone Number)  |  |  |  |
| Enclosed is a check for the following amount:                    | 27  |  |  |  |
| \$25.00 Filing Fee and Certificate of Dissolution                | \$55.00 Filing Fee, Certificate of Dissolution & Ton Certified Copy (additional copy is enclosed) |  |  |  |
| MAILING ADDRESS:   | STREET/COURIER ADDRESS:   |  |  |  |
| Registration Section Division of Corporations                    | Registration Section Division of Corporations   |  |  |  |
| P.O. Box 6327  | Clifton Building  |  |  |  |
| Tallahassee, FL 32314  | 2661 Executive Center Circle Tallahassee, FL 32301  |  |  |  |

### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1.        | The name of a limited liability company is  |  |  |  |
|-----------|---|--|--|--|
|           | CAPITAN CAPACHO LLC   |  |  |  |
| 2.        | The Articles of Organization were filed on $68/22/2014$ and assigned  |  |  |  |
|           | document number 1 1 4 8 0 0 1 3 2 2 4 7   |  |  |  |
| 3.        | The delayed effective date the dissolution if not effective on the date of filing: 01/16/2015  (effective date cannot be prior to or more than 90 days later than date document is received for filing)                         |  |  |  |
| 4.        | 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).   |  |  |  |
|           |   |  |  |  |
|           |   |  |  |  |
|           |   |  |  |  |
| 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.<br>Iis | Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:  |  |  |  |
| <         | Ramian a Capacya 13 31  |  |  |  |
| ۷         | Signature RAMIRO O. CAPACHO SI SI   |  |  |  |
|           | ELLING PPP, 928 00  |  |  |  |
|           | 27 F  |  |  |  |
|           | - 1985년 - 198<br>- 1985년 - 1985 |  |  |  |
|           |   |  |  |  |

#### Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

| Name of Limited Liability Company:   |                                |
|--|--------------------------------|
| Document number of Limited Liability Company is:   |                                |
| Date of dissolution was:   |                                |
| Description of information that must be included in a writ   | tten claim:                    |
|  |                                |
|  |                                |
|  |                                |
|  |                                |
|  |                                |
| Mailing address where claims can be sent: (Claims canno  | 27                             |
|  | ्रेस <u>व</u>                  |
|  |                                |
| A claim against the above named limited liability compan<br>claim is commenced within 4 years after the filing of this |                                |
|  |                                |
| Printed Name of the Person Filing  | Signature of the Person Filing |

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00