

# L14000/44683

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H16000079568 3)))



H160000795683ABC9

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CLARA GIRALDO, P.A.  
Account Number : I19990000017  
Phone : (305)485-9300  
Fax Number : (305)485-1098

2016 APR -1 AM 8:41  
RECEIVED  
TALLAHASSEE, FLORIDA

RECEIVED

2016 APR -1 AM 9:46

RECEIVED  
TALLAHASSEE, FLORIDA

**LLC DISSOLUTION OR WITHDRAWAL  
MENDEZ SERVICES OF FLORIDA LLC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 1 *     |
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$30.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY  
EXAMINER

APR - 4

03/31/2016 17:04  
850-617-8381

3054851098

CLARA GIRALDO P.A  
3/31/2016 1:43:45 PM PAGE 1/001

Fax Server

PAGE 02



March 31, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

MENDEZ SERVICES OF FLORIDA LLC  
8960 NW 8TH ST  
202  
DORAL, FL 33172US

SUBJECT: MENDEZ SERVICES OF FLORIDA LLC  
REF: L14000144683

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

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) 245-6031.

Stacey M Mason  
Regulatory Specialist II

FAX Aud. #: H16000079568  
Letter Number: 216A00006604

RECEIVED  
2016 APR -1 AM 9:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

(H1600000795683)

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

1. The name of a limited liability company is

Mendez Services of Florida LLC

2. The Articles of Organization were filed on 09/16/2014 and assigned

document number L14000144683

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)

**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).

This Corporation did not meet the Proposed goals.

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:

X Carlos A. Miranda  
Signature

Printed Name

CLARA GIRALDO P.A.  
4080 SW 84 AVENUE SUITE C  
MIAMI, FL 33155  
PH.: (305) 485-9300

(H160000795683)

CLARA GIRALDO P.A.  
4080 SW 84 AVENUE SUITE C  
MIAMI, FL 33155  
PH.: (305) 485-9300

### 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:

Mendez Services of Florida LLC

Document number of Limited Liability Company is:

L14000144683

Date of dissolution was:

3/25/16

Description of information that must be included in a written claim:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

X Carlos A. Miranda  
Printed Name of the Person Filing

[Signature]  
Signature of the Person Filing

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

FILED  
2016 APR - 1 AM 8:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA