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From: Paols Sanchez Fax: (305) 670-1891
Division of Corporations

To:

Fax: (850) 017-6383

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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From:

Account Name : GUZMAN & GUZMAN, P.A.

Account Number : I20080000090 Phone : (305)670-1991 Fax Number : (305)670-1993

LLC DISSOLUTION OR WITHDRAWAL

G.I.M. LLC

	Certificate of Status	0	
	Certified Copy	0	ಫ c ⇒
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₹	Estimated Charge	\$25.00	N P
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Help



From: Paola Canchez

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability comp O.I.M. LLC	eny is		<u> </u>
2. The Articles of Organization were fi	led on 10/21/2014	and assign	ned
document number L14000164006	· ·		
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. A description of occurrence that resu 605.0707, Florida Statutes, (copy 605	ilted in the limited liability com 5.0707 on back cover letter).	ipany's dissolution pu	ersuant to section
A 100% OF ALL MEMBERS AGREED	TO FILE FOR A COMPLETE D	ISSOLUTION	•
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. Signature of an authorized person or i sted above to wind up the company's a	if there are no members, the sig crivities and affairs:	nature of the person a	appointed and
	r		
MUMA	WAXMAN, AN	NA	9
Signature	:	Printed Name	25.

From: Paola Sanchez Fax: (305) 670-1991

Ta:

Fax: (850) 517-5383 Page 1 of 3 11/28/2017 9.26 AM

FAX

FROM

Paola Sanchez

TO

Phone (786) 475-7424 * 108 Fax Number (786) 347-9009

DATE 11/28/2017

NOTE

Phone

Fax Number + 18506176383