

L14000171862

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EXAMINER  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 5, 2015

AMADEUS TAX & ACCOUNTING  
ERIC RODRIGUEZ  
1201 WINTER GARDEN VINELAND RD.  
WINTER GARDEN, FL 34787

SUBJECT: FLORIDA AUTO REPAIRS II, LLC  
Ref. Number: L14000171862

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TALLAHASSEE, FLORIDA

We have received your document for FLORIDA AUTO REPAIRS II, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 215A00023508



October 30, 2015


Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: FLORIDA AUTO REPAIRS II, LLC  
Document Number: L14000171862

To Whom It May Concern:

The enclosed Articles of Dissolution for FLORIDA AUTO REPAIRS II, LLC. and the fee associated with processing such change are submitted for filing. For any further information concerning this matter, please contact our office at (407) 614-8363.

Very truly yours,

  
Eric Rodriguez

**ARTICLES OF DISSOLUTION**

Pursuant to Section 605.0707, Florida Statutes, this limited liability company submits the following articles of dissolution:

**FIRST:** The name of the limited liability company as filed with the Florida Department of State:

**FLORIDA AUTO REPAIRS II, LLC**

**SECOND:** The Articles of Organization were filed on **November 4, 2014** and assigned document number **L14000171862**

**THIRD:** The delayed effective date of the dissolution is effective on the date of filing.

**FOURTH:** The member of the limited liability company has decided to submit Articles of Dissolution to discontinue all operations of their business.

**FIFTH:** The name and address of the person appointed to wind up the company's activities and affairs:

**MAGNOLIA CHACON**  
1007 S DILLARD STREET  
WINTER GARDEN, FL 34787

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Florida Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: \_\_\_\_\_

**MAGNOLIA CHACON**