44000188387

(Requestor's Name)
(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:

Office Use Only



400296949794

03/27/17--01034--023



MAR 2 8 2017 S. YOUNG

COVER LETTER

TO:

Registration Section Division of Corporations

🌊 FERNANDO E INCIARTE 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:

FERNANDO E INCIA	K	
------------------	---	--

(Name of Person)

(Firm/Company)

8313 CITRUS CHASE DR

(Address)

ORLANDO FL 32836

(City/State and Zip Code)

For further information concerning this matter, please call:

FERNANDO E INCIARTE

407

692-2491

(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
	FERNANDO E INCIARTE LLC
2.	The Articles of Organization were filed on MARCH 11 OF 2016 and assigned
	document number L4000188387
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 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).
	THE COMPANY IS NOT LONGER IN ACTIVITY
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
	FERNANDO E INCIARTE
	Signature Printed Name
	FILING FEE: \$25.00