

L15000015205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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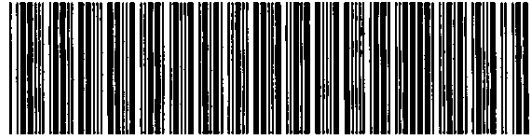
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

AUG 18 2016

Y SULKER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LA VILLA GROUP LLC  
(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:

IVAN SUAREZ

(Name of Person)

LA VILLA GROUP LLC

(Firm/Company)

1580 NW BOCA RATON BLVD STE 5

(Address)

BOCA RATON, FL, 33432

(City/State and Zip Code)

For further information concerning this matter, please call:

IVAN SUAREZ

(Name of Person)

at 954 292-8150

(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

LA VILLA GROUP LLC

2. The Articles of Organization were filed on JANUARY 26, 2015 and assigned

document number L15000015205

3. The delayed effective date the dissolution if not effective on the date of filing: 08/09/2016  
(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).

THE COMPANY HAD NO FINANCIAL ACTIVITY OR ECONOMIC BENEFITS OF ANY KIND.

5. If there are no members, enter the name and address of the person appointed to wind up the company's

activities and affairs:

IVAN SUAREZ

6640 NW 1ST TERRACE

FORT LAUDERDALE, FL, 33309

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:

Ivan Suarez  
Signature

IVAN SUAREZ

Printed Name

**FILING FEE: \$25.00**

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DEPARTMENT OF  
STATE, FLORIDA