

LIS 000033403

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(Business Entity Name)

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RECEIVED  
DEPARTMENT OF STATE  
15 AUG 31 PM 3:00

FILED  
2015 AUG 31 AM 9:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Cuffigan SEP - 1-2015

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 761475 8035945

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : August 26, 2015

ORDER TIME : 2:24 PM

ORDER NO. : 761475-010

CUSTOMER NO: 8035945

DOMESTIC FILINGS

NAME: O. BOUZA, L.L.C.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER'S INITIALS: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 9, 2015

CSC  
MELISSA ZENDER

SUBJECT: O. BOUZA, L.L.C.  
Ref. Number: L15000033403

**RESUBMIT**

Please give original  
submission date as file date.

We have received your document for O. BOUZA, L.L.C. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The Notice of Dissolution must contain a description of information that should be included in a written claim.

The Notice of Dissolution is optional.

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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 815A00018408

RECEIVED  
DEPARTMENT OF  
15 SEP 21 PM 4:21  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

2015 AUG 31 AM 9:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
O. BOUZA, L.L.C.


2. The Articles of Organization were filed on 02/23/2015 and assigned  
document number L15000033403

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).  
No longer conducting business.

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:

 8/28/15  
\_\_\_\_\_  
Signature

Oscar Bouza

\_\_\_\_\_  
Printed Name

FILING FEE: \$25.00