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(R	equestor's Name)	
(A	ddress)	•
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	susiness Entity Name)	
(C	Occument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	o Filing Officer:	
L	<u>.</u>	



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COVER LETTER

	gistration Section vision of Corporations			
CUBIDOS	DHAH GP, LLC			
SUBJECT:		ed Liability Company)		
The enclosed	d Articles of Dissolution and fee(s) are submit	ted for filing.		
Please return	all correspondence concerning this matter to	the following:		
	Austin Agnew			
	(National Color of the National Color of the	ne of Person)		
	<u> </u>	m/Company)	•	
	900 Parker Square, Ste. 250	nvCompany)		
		(Address)		
	Flower Mound, Texas 75028			
	(City/Sta	ate and Zip Code)		
For further in	nformation concerning this matter, please call			
Αι	ustin Agnew	972 885-6998		
	(Name of Person)	(Area Code & Daytime Telephone Numb	=	n
Enclosed is a	check for the following amount:	エアン・シャー・ファー・ファー・ファー・ファー・ファー・ファー・ファー・ファー・ファー・ファ	PR.	ALPHAN Market
■ \$25	.00 Filing Fee and Certificate of Dissolution	S55.00 Filing Fee, Certificate of Dissolution Certified Copy (additional copy is enclosed	# 5 T W	
	MAILING ADDRESS:	STREET/COURIER ADD	KESS E	
	Registration Section	Registration Section		
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	;	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

DHAH GP, LLC		·
The Articles of Organization	n were filed on February 27, 2015	and assigned
document numberL1500003	37069	
(effective Note: If the date inserted in the	he dissolution if not effective on the da date cannot be prior to or more than 90 days lat his block does not meet the applicable statu tive date on the Department of State's recor	er than date document is received for filing) tory filing requirements, this date will not
A description of occurrence 605.0707, Florida Statutes, (Consent of all the members	that resulted in the limited liability corcopy 605.0707 on back cover letter).	npany's dissolution pursuant to sectio
,		
If there are no members, ent activities and affairs:	er the name and address of the person a	
	•	
	•	
	•	
activities and affairs: Signature of an authorized p	person or if there are no members, the si	9016 APR
activities and affairs:	person or if there are no members, the sinpany's activities and affairs:	ignature of the personappointed and

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