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## COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: MAMITA'S TTALIAW PIZZERIA, 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:

RICHARD OLSEN					
(Name of Person)					
C/O ADRIEN MANN					
(Firm/Company)					
53 SEDGWICK ST. UNIT A					
(Address)					
BOSTON, MA 02130					
(City/State and Zip Code)					

For further information concerning this matter, please call:

RICHARD OLSEN at (843) 597-5428

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

S55.00 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		
	MAMITA'S ETALIAN	PIZZERIA, LLC	
2.	The Articles of Organization were filed on <u>AP</u>	RIL 1, 2015 and assigned	
	document number <u>L 15 0000 5 7</u>	<u>1</u> 75	
3.	The delayed effective date the dissolution if not effective date cannot be prior to or mo Note: If the date inserted in this block does not meet the listed as the document's effective date on the Department	s applicable statutory filing requirements, this date will no	2017 ot be
4.	A description of occurrence that resulted in the limi 605.0707, Florida Statutes, (copy 605.0707 on back	ted liability company's dissolution pursuant to section cover letter).	on <b>J</b>
	BUSINESS SOLD		
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		3"	
•			<u>-</u>
	If there are no members, enter the name and address activities and affairs:	of the person appointed to wind up the company's	
		•	
S. list	Signature of an authorized person or if there are no reted above to wind up the company's activities and aff	nembers, the signature of the person appointed and fairs:	•
9	1/ 200	the warm of the state	
4	Signature	RICHARD OLSEN Printed Name	
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**FILING FEE: \$25.00**