

L15 0000 67905

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

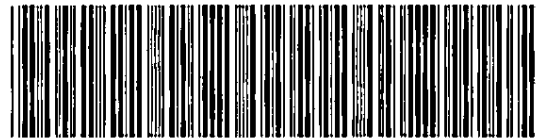
(Document Number)

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

Special Instructions to Filing Officer:

Filed a merger this dissolution is not needed or required. Merged  
in a non-qualified Texas PLLC

Office Use Only



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07/07/20 11:01:04 -004 \*\*25.00

RECEIVED

JUL 06 2020

SECRETARY OF STATE  
TALLAHASSEE, FL

2020 JUL -6 PM 4:06

FILED

VOIDED

D. BRUCE  
AUG 19 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Alvarez Plastic Surgery PLLC  
\_\_\_\_\_  
(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:

Amy Jetel  
\_\_\_\_\_  
(Name of Person)  
  
Jetel Law, PLLC  
\_\_\_\_\_  
(Firm/Company)  
  
3300 Bee Caves Rd. Ste 650-108  
\_\_\_\_\_  
(Address)  
  
Austin, Texas 78746  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Amy Jetel 512 370-2747  
\_\_\_\_\_  
(Name of Person) at ( ) (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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

2020 JUL -8 AM 7:06  
SECRETARY OF STATE  
TALLAHASSEE, FL  
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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Alvarez Plastic Surgery PLLC

2. The Articles of Organization were filed on April 17, 2015 and assigned

document number L15000067905

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).

Merging into Texas entity, Alvarez Plastic Surgery PLLC.

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

**VOIDED**

2020 JUL - 1 AM 7:06  
SECRETARY OF STATE  
TALLAHASSEE, FL

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:

Sergio Alvarez (Jul 1 2020 14:56:00)

Signature

Sergio A. Alvarez

Printed Name

**FILING FEE: \$25.00**