

L15000072538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

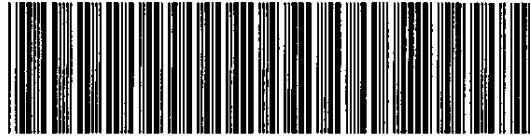
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SECRETARY OF STATE
TALLAHASSEE-FLORIDA

FEB 23 2016
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

ALL2 Logistics L.L.C.
(Name of Limited Liability Company)

Document # L15 000072538

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Antoine LaFontant

(Name of Person)

ALL2Logistics

(Firm/Company)

4511 Moira Street

(Address)

Orlando, FL. 32811

(City/State and Zip Code)

For further information concerning this matter, please call:

Antoine LaFontant

(Name of Person)

at 407 221-1318

(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

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TALLAHASSEE
FLORIDA
STATE

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

ALL2Logistics

2. The Articles of Organization were filed on 02.17.16 and assigned

document number L15 0000 72538

3. The delayed effective date the dissolution if not effective on the date of filing: 02.17.16
(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).

Not able to start business in Orlando, Florida

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

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:


Signature

Antoine LaFontant

Printed Name

FILING FEE: \$25.00

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2016 FEB 22 AM 11:39
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TALLAHASSEE, FLORIDA