L15000076777

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBTECT.

R3 Jewellery & Specimes, 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:

Ronaldo O. Chaves				
(Name of Person)				
(Firm/Company)				
510 NW 77th Street, Bay 510				
(Address)				
Boca Raton, Florida 33487				
(City/State and Zin Code)				

For further information concerning this matter, please call:

Ivy Lynn Defino, CPA at (954) 906-1000 (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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

l.	The name of a limited liability company is R3 Jewellery & Specimes, LLC				
2.	The Articles of Organization were filed on Ar	oril 30, 2015	and assigned		
	document number L15000076777				
3.	The delayed effective date the dissolution if n (effective date cannot be prior to Note: If the date inserted in this block does not m listed as the document's effective date on the Dep	neet the applicable statutory	та оста со сеттем те се		
١.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).				
	The members of the LLC have chosen not to move	forward with business ope	rations. All members have		
	consented to the dissolution of the limited liability	company named above.			
5.	If there are no members, enter the name and a activities and affairs:	ddress of the person app	ointed to wind up the company's		
	/				
5. lis	Signature of an authorized person or if there a sted above to wind up the company's activities	re no members, the signated affairs:	ature of the person appointed and		
	1 Mu.	Ronaldo O. Chav	ves		
-	Signature		Printed Name		
	NAME AND ADDRESS OF THE PROPERTY OF THE PROPER	INC PPP, 698 00			