

# L15 0000 90956

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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MAIL

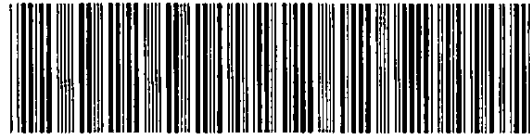
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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DIVISION OF CORPORATIONS  
2017 JUN 19 PM 12:24

N. CAUSSEAU

JUN 20 2017

TO: FLORIDA DEPARTMENT OF STATE

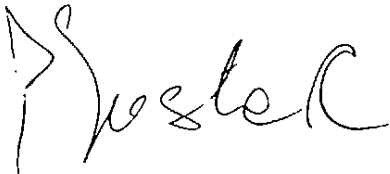
DIVISION OF CORPORATIONS

AT.: RUBY DUNLAP

I, Paulina A Yusta, MGRM of ALLTRANSLOG, LLC., Document Number L15000090956

I declare that the dissolution of the corporation AllTransLog, LLC., is irrevocable and I release the name that can be used by another company.

This letter is to confirm that my decision to dissolve the company is final.

A handwritten signature in black ink, appearing to read 'Paulina A Yusta', with a stylized flourish at the end.

PAULINA A YUSTA

Miami, June, 13, 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ALLTRANSLOG, 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:

LEONARDO R ROJAS

(Name of Person)

L & B PROFESSIONAL ASSOCIATES INC

(Firm/Company)

4913 SW 154 CT

(Address)

MIAMI, FL 33185

(City/State and Zip Code)

For further information concerning this matter, please call:

LEONARDO R ROJAS at 786 487-6703

(Name of Person)

(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**

1. The name of a limited liability company is

ALLTRANSLOG, LLC

2. The Articles of Organization were filed on 05/21/2015 and assigned

document number L15000090956

3. The delayed effective date the dissolution if not effective on the date of filing: 06/30/2017

(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).

THE CONSENT OF ALL THE MEMBERS AND STOP TO DOES BUSINESS IN FLORIDA STATE

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

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

PAULINA A YUSTA

Printed Name

**FILING FEE: \$25.00**

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SECRETARY OF STATE  
DIVISION OF CORPORATION  
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