U15000123826

(Requestor's Name) (Address)	600287335296
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	07/22/1601006023 **25.00
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COVER LETTER

TO:

Registration Section Division of Corporations

DELICIAS DE ECUACUBA 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:

JACKIE ROJAS-QUINONES

(Name of Person)

ACCOUNTING & BEYOND LLC

(Firm/Company)

6702 BENJAMIN RD., SUITE 100

(Address)

TAMPA, FL 33634

(City/State and Zip Code)

For further information concerning this matter, please call:

JACKIE ROJAS-QUINONES

at (813) 998-9800

(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

DELICIAS DE ECUACUBA LLC	
2. The Articles of Organization were filed on	7/20/2015 and assigned
document number L15000123826	
3. The delayed effective date the dissolution if (effective date cannot be prior Note: If the date inserted in this block does not listed as the document's effective date on the D	or to or more than 90 days later than date document is received for filing) at meet the applicable statutory filing requirements, this date will not be
4. A description of occurrence that resulted in 605.0707, Florida Statutes, (copy 605.0707)	the limited liability company's dissolution pursuant to section on back cover letter).
THE BUSINESS TOOK SO MUCH EQUITY T	O GET STARTED BETWEEN LICENSING, PERMITS AND
RENOVATIONS THAT CANNOT AFFORD T	TO CONTINUE IN BUSINESS.
5. If there are no members, enter the name and activities and affairs:	d address of the person appointed to wind up the company's
Signature of an authorized person or if there isted above to wind up the company's activities	Soft of the second of the seco
No Constituto	
Signature	Printed Name