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12/23/2015

2016-01-05 17:12:52 (GMT)

407650 From: Account Bookkeeping

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP
Account Number : I20120000055
Phone : (407)898-1757
Fax Number : (407)897-5336

FILED
16 JAN -5 PM 2:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC DISSOLUTION OR WITHDRAWAL
I BELIEVE SOLUTIONS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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2016 JAN -5 PM 12:18
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M. MILLIGAN
EXAMINER

JAN - 6 2015

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December 30, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

I BELIEVE SOLUTIONS, LLC
9316 NORTHLAKE PKWY
101
ORLANDO, FL 32827US

SUBJECT: I BELIEVE SOLUTIONS, LLC
REF: L15000141334

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

If you wish to file the "Notice of Dissolution" with the "Articles of Dissolution, you must complete the document in its entirety. Otherwise, please remove it, as it is optional, and only submit the "Articles of Dissolution."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan
Senior Section Administrator

FAX Aud. #: H15000304934
Letter Number: 215A00027151

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **I BELIEVE SOLUTIONS, 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:

MARIANA SOUZA

(Name of Person)

ACCOUNT BOOKKEEPING CORP

(Firm/Company)

3300 S HIAWASSEE RD STE 106

(Address)

ORLANDO, FL 32835

(City/State and Zip Code)

For further information concerning this matter, please call:

MARIANA SOUZA

(Name of Person)

407 898-1757

(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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ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

I BELIEVE SOLUTIONS, LLC

2. The Articles of Organization were filed on 08/18/2015 and assigned

document number L15000141334

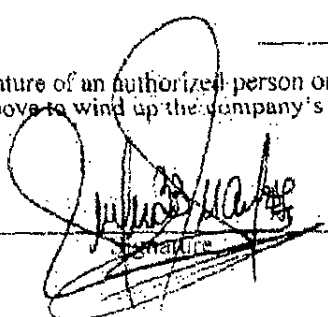
3. The delayed effective date the dissolution is not effective on the date of filing:
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date 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).

THE DISSOLUTION WAS APPROVED BY THE MEMBERS.

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:



FABIO EDUARDO BORGES

Printed Name

FILED

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TALLAHASSEE, FLORIDA

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