L15000147069

(Re	equestor's Name)
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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06/10/21--01007--029 **25.00

ALLAHASSEE, FLUND

JUN 10 PM 2: 33

RECEIVED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Walk-In Will Pick Up Courier			Time		UCC 11 Search
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	Walk-In Thomasure GA &ro				Courier

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabil WILLISAU LLC	ity company is					
2.	The Articles of Organization	n were filed on	5	_ and assigned	d		
	document number L1500014	17069 —	_				
3.	The delayed effective date t (effective Note: If the date inserted in t listed as the document's effec	date cannot be prior to or mor his block does not meet the	e than 90 days later than date (applicable statutory filing)	document is recei	ived for his date	tiling) will n	iot be
4.	A description of occurrence 605.0707, Florida Statutes. (that resulted in the limite copy 605.0707 on back c	ed liability company's di over letter).	ssolution purs	uant te	secti	on
	Consent by the members repres	senting 100% Ownership In	terest				
	If there are no members, entactivities and affairs:		of the person appointed t	o wind up the	comp	any`s	
		20200 W. Dixie Hwy Sui	te 1104				
		Aventura, FL 33180			-:	25	
) 	τι " (,) 	10: H	**************************************
6. ab	Signature of an authorized pove to wind up the company	person or if there are no n's activities and affairs:	nembers, the signature of	the person ap	poiñte	d and	listed
	Carlos Verr	10220					
_			Carlos Agustin Vernazza				
	Signature		Printed	l Name			

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: WILLISAU LLC	
Document number of Limited Liability Company is: L1500014	47069
Date of dissolution was:	·
Description of information that must be included in a written	claim:
Name of Claimant, Claimant address, Amount Claimed, Account n	umber and or Invoice number (if applicable)
the Date the Claim or debt incurred, maturity date (if applicable) an	d detailed history of claim or debt.
Mailing address where claims can be sent: (Claims cannot be	sent to the Division of Corporations)
Carlos Agustin Vernazza	
20200 W. Dixie Hwy Suite 1104	
Aventura, FL 33180	
A claim against the above named limited liability company w claim is commenced within 4 years after the filing of this noti	ill be barred unless a proceeding to enforce the ce.
Carlos Agustin Vernazza	Carlos Vernazza
Printed Name of the Person Filing	Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00