

L15000197803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

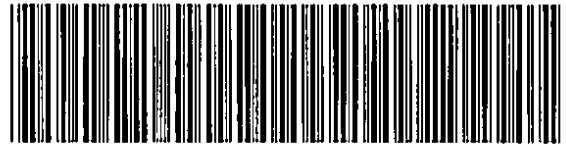
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/12/20--01008--004 **25.00

RECEIVED

MAY 11 2020

2020 JUN 15 10 11

Att. of
Dis.
w/Notice

SEP 22 2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 JUN 1 11 2:21

June 1, 2020

IVANIA OBERTI
200 S. BISCAYNE BLVD
SUITE 2790
MIAMI, FL 33131

SUBJECT: AGUA VIVA 1208, LLC
Ref. Number: L15000197803

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

In order to file the Notice of Limited Liability Company Dissolution, Articles of Dissolution for a Limited Liability Company must be filed first.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Querida R Moore
Regulatory Specialist II

Letter Number: 220A00010814

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AGUA VIVA 1208, 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:

IVANIA OBERTI, Esq

(Name of Person)

The Law Offices of Ivania Oberti, PA

(Firm/Company)

701 Brickell Avenue, Suite 1550

(Address)

Miami, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

Ivania Oberti

(Name of Person)

at (305)

714-9972

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

AS PER LETTER ENCLOSED

☐ \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
AGUA VIVA 1208, LLC

2. The Articles of Organization were filed on 11/23/2015 and assigned
document number 1.15000197803

3. The delayed effective date the dissolution if not effective on the date of filing: 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.

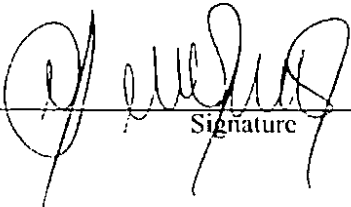
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Consent of all of the members after the filing of a statement of administrative dissolution by the Florida Department

State on September of 27, 2019 pursuant to s. 605.0714.

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

Ivania Oberti, Esq

Printed 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.

AGUA VIVA 1208, LLC

Name of Limited Liability Company: _____

L 15000197803

Document number of Limited Liability Company is: _____

Date of dissolution was: Effective Date of filing Articles of Dissolution

Description of information that must be included in a written claim:

All debts owed to and all claims against the limited liability company, must be in writing and will be received by any

person, at The law Offices of Ivania Oberti PA at the business address set forth below. Please include your name,

basis for claim, amount, and origination date with all pertinent documentation in support of your claim. Deadline for

submitting claims is 120 days after the effective date of this Notice. The dissolved LLC may make distributions to other

claimants or members without further notice. Any claims that are not received prior to the date set forth above will

not be recognized.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

THE LAW OFFICES OF IVANIA OBERTI, PA

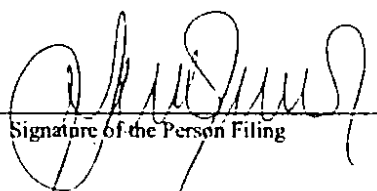
701 BRICKELL AVENUE, SUITE 1550

MIAMI, FL 33131

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Ivania Oberti, Esq

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