L15000 206871

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ry/State/Zip/Phone	÷#)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				





300289871853

09/06/16--01015--023 **25.00



M. MILLIGAN

SEP - 6 -

COVER LETTER

TO:

Registration Section Division of Corporations

ALFA TRUCKLINE INVESTMENTS 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:

FERNANDEZ, YURAIME A		
(Name of Person)		
(Firm/Company)		
10726 SW 148TH CT		
(Address)		
MIAMI, FL 33196		
(City/State and Zip Code)		

For further information concerning this matter, please call:

FERNANDEZ, YURAIME A at (786

(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 limite	. , ,		The state of the s
	ALFA TRUCKLINI	E INVESTMENTS LL	.c % //.
2. The Articles of Orga	unization were filed on	12/11/2015	and assigned
document number L	15000206871		
Note: If the date inse		o or more than 90 days la seet the applicable state	ter than date document is received for filing) utory filing requirements, this date will not be
4. A description of occi 605.0707, Florida Sta	urrence that resulted in the atutes, (copy 605.0707 on	e limited liability co back cover letter).	mpany's dissolution pursuant to section
Seized operations			
5. If there are no memb	DITI IDO DI ANIC		appointed to wind up the company's
	9831 NW 58TH S	т	
	DORAL, FL 3317	78	
5. Signature of an authoristed above to wind up	prized person or if there at the company's activities a	re no members, the sand affairs:	signature of the person appointed and
Signature		PULIDO, BL	ANCA C Printed Name
W. Silly W. W.			

FILING FEE: \$25.00