

L16000013061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

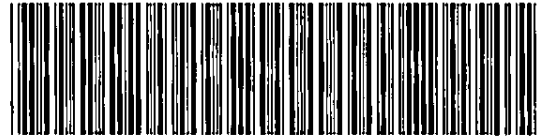
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/17/18--01058--018; **30.00

FILED
OCT 17 PM 11:55

10/30/18 Q5

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D' LUCAS RESTAURANT 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:

MARIA MADALENA CALDAS - LOPES
(Name of Person)

MADE IN BRAZIL SERVICES
(Firm/Company)

12811 KENWOOD LANE STE.#208
(Address)

FORT MYERS FLORIDA 33907
(City/State and Zip Code)

FILED
JUN 17 11:55

For further information concerning this matter, please call:

MARIA MADALENA CALDAS - LOPES at (239) 362 - 3121
(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 limited liability company is

D' LUCAS RESTAURANT LLC

2. The Articles of Organization were filed on 03/30/2017 and assigned

document number L 16000013061

3. The delayed effective date the dissolution if not effective on the date of filing: 08/01/2018
(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).

BUSINESS VENTURE HAS FAILED

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: N/A

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:

N/A
Signature

N/A
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.

Name of Limited Liability Company: D' LUCAS RESTAURANT LLC

Document number of Limited Liability Company is: L16000013061

Date of dissolution was: 08/01/2018

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

BUSINESS VENTURE HAS FAILED

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

12811 KENWOOD LANE

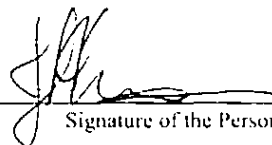
STE. #208

FORT MYERS, FL 33907

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.

CRISTIANA LUCAS ALVES

Printed Name of the Person Filing



Signature of the Person Filing