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(Re	equestor's Name)	· · · · · ·
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	∍ #)
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATI

S. Warren MAY 2 2 2017

COVER LETTER

TO: Registration Section Division of Corporations

Sweet Florida Distributor

(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:

Hendrix Gonzalez Troncoso	
(Name of Person)	
Sweet Florida Distributor	
(Firm/Company)	
8440 SW 107 AV Apt 216	
(Address)	

Miami Florida 33173

(City/State and Zip Code)

For further information concerning this matter, please call:

Hendrix
(Name of Person)

at (786) 444-5900
(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

. The name of a limited liab Sweet Florida Distributor	rility company is	
. The Articles of Organizati	ion were filed on 04/01/2016 and assigned	
document number L16000	015924	
Note: If the date inserted if	the dissolution if not effective on the date of filing: 04/30/2017 we date cannot be prior to or more than 90 days later than date document is received for filing) In this block does not meet the applicable statutory filing requirements, this date will not be detive date on the Department of State's records.	
A description of occurrence 605.0707, Florida Statutes.	ce that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter).	
· ·	le and closed due to economic problems.	
If there are no members, e	enter the name and address of the person appointed to wind up the company's	
activities and affairs: Hendirx Gonzalez Troncoso		
	8440 SW 107 AV Apt 216 Miami Fl 33173	
Signature of an authorized sted above to wind up the co	I person or if there are no members, the signature of the person appointed and ompany's activities and affairs:	
Signature	Hendrix Gonzalez Printed Name	
Signature	FILING FEE: \$25.00	
	FIBRIO PEE. 023.00	