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-16000019401

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Account Name

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Account Number : I20060000141

Phone

: (561)929-6899

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LLC DISSOLUTION OR WITHDRAWAL R & R DREAM HOMES LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBTECT

R & R DREAM HOMES LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANIBAL QUINTAO

(Name of Person)

EXPRESS ACCOUNTING

(Firm/Company)

3927 N FEDERAL HWY

(Address)

POMPANO BEACH, FL 33064

(City/State and Zip Code)

For further information concerning this matter, please call:

ANIBAL QUINTAO

954

788-7400

(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 R&R DREAM HOMES LLC
2.	The Articles of Organization were filed on 01/28/2016 and assigned
	document number L16000019401
3.	The delayed effective date the dissolution if not effective on the 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 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).
	CUT OF BUSINESS.
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. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs: RENATA A FACCHINI
	Signature Printed Name
	FILING FEE: \$25.00