# L14 000030274

(Re	equestor's Name)				
(Address)					
(Àd	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
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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03/11/16--01022--004 \*\*25.00



MAR 1 4 2016 J SHIVERS

# **COVER LETTER**

TO:	Registration Section
	Division of Corporations

SUBJECT: AA ELONOMY Transmission of Auto Repair 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:

MD Shahed Anwar	
	of Person)
(Firm/C	Company)
844 NW \$1st Ten	466
(Ad	dress)
Plantation, FL 3	33324
	and Zip Code)

For further information concerning this matter, please call:

Tinothy G. Glass, Esq., at (56) 651 - 4149

(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 hability	company is	( A	1.1.0
AA Economy T	ransmission or A	-uto Kepair	
,			
2. The Articles of Organization	were filed on $\frac{1-28-10}{1-28}$	and	l assigned
document number LI600	00 20 274		
Note: If the date inserted in this	dissolution if not effective on te cannot be prior to or more than 90 s block does not meet the applicab e date on the Department of State	days later than date docum le statutory filing requir	nent is received for filing) ements, this date will not be
4. A description of occurrence the 605.0707, Florida Statutes, (co	at resulted in the limited liabil	ity company's dissoluter).	ition pursuant to section
Business was filed to			isiness. After due
diligence, AA Econom	Trasmission + Auto	Repair LIC ele	ctd not to pwehase
the assif if the bus	siness. As such, ther	e is no need.	for the LLC +
I wish to have it	dissolved.		
5. If there are no members, enter	the name and address of the n	erson appointed to wi	nd un the commany's
activities and affairs:	MD Shahed Anwar	· -	76 66
activities and arrans.	944 NW 815t Tel		MAR I
	Plantakan, Fl 3		A A
_	•		8: 05 STATE
6. Signature of an authorized per listed above to wind up the comp	son or if there are no members any's activities and affairs:	, the signature of the	person appointed and
blace		d SHAHED	ANWAR
Signature\		Printed Nan	ne

**FILING FEE: \$25.00**