

L16000044599

(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



000419910010

effective date 12-31-23

LLC dissolution

FILED  
2023 DEC 21 PM 1:20  
TALLAHASSEE, FLORIDA

RECEIVED  
2023 DEC 21 AM 11:19  
TALLAHASSEE, FLORIDA

A. RAMSEY  
DEC 22 2023



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations  
From: Eyliena Baker  
Ext: 61594  
Date: 12/21/23  
Order #: 1356925-5  
Re: Codina Fronterra, LLC  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed-please find:

Application for Dissolution/Cancellation/Termination

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:  
I20000000195

auth

A handwritten signature in black ink, appearing to read 'Eyliena Baker', is written over the word 'auth'.

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CODINA FRONTERA, 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:

NANCY HILL

\_\_\_\_\_  
(Name of Person)

CODINA PARTNERS, LLC

\_\_\_\_\_  
(Firm/Company)

2020 SALZEDO STREET 5TH FLOOR

\_\_\_\_\_  
(Address)

CORAL GABLES, FL 33134

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

NANCY HILL

\_\_\_\_\_  
(Name of Person)

305

at ( )

529-1320

\_\_\_\_\_  
(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED  
2023 DEC 21 PM 1:20  
CLERK OF STATE  
OF FLORIDA

1. The name of a limited liability company is  
CODINA FRONTERA, LLC

2. The Articles of Organization were filed on 03/04/2016 and assigned  
document number L16000044599

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2023  
(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):  
COMPANY IS NO LONGER OPERATING.

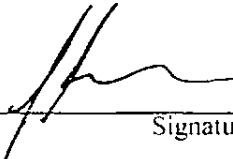
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: RICK MORENO

CODINA PARTNERS, LLC

2020 SALZEDO STREET 5TH FLOOR

CORAL GABLES, FL 33134

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:

  
Signature

BY CODINA MANAGER, LLC, ITS MANAGER  
FEDERICO (RICK) MORENO, VICE PRESIDENT  
Printed Name

FILING FEE: \$25.00