

L16 0000 55 P46

(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



200286685132

06/15/16--01010--008 \*\*25.00

STATE DEPT OF MAIL  
TALLAHASSEE, FLORIDA  
15 JUN 15 AM 10:02  
H. E. R.

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AFG TRUCKING 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:

ALSEMO FELIPE  
(Name of Person)  
AFG TRUCKING LLC  
(Firm/Company)  
6972 SW 159TH CT  
(Address)  
MIAMI, FL 33193  
(City/State and Zip Code)

For further information concerning this matter, please call:

ALSEMO FELIPE at ( 786 ) 838-5834  
(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

AFG TRUCKING, LLC

2. The Articles of Organization were filed on 03/16/2016 and assigned

document number L16000055846

3. The delayed effective date the dissolution if not effective on the date of filing: 06/01/2016  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

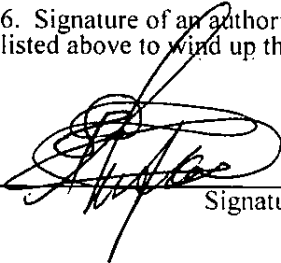
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Closed business (VEHICLE SOLD)

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. 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

ALSEMO FELIPE

Printed Name

**FILING FEE: \$25.00**

15 JUN 15 AM 10:02  
STATE OF FLORIDA  
DEPARTMENT OF STATE