1/60000 62360

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	_
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	_

Office Use Only



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12/13/18--01003--015 **25.00

D. SCOTT JAN 7 2019



December 21, 2018

RAMON CONTRERAS 2900 N 24TH AVE APT 6207 HOLLYWOOD, FL 33020

SUBJECT: RAMAJECO ENTERPRISES LLC

Ref. Number: L16000062360

We have received your document for RAMAJECO ENTERPRISES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please include desciption of occurrence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

www.sunbiz.org

DO DOW GOOD TO HILL BY STANDARD

Letter Number: 818A00026218

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

RAMAJECO ENTERPRISES 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:

RAMON CONTRERAS / YOLIENNY CONTRERAS

(Name of Person)

(Firm/Company)

2900 N 24th AVE APT 6207

(Address)

HOLLYWOOD FL 33020

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (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 liabil RAMAJECO ENTERPRISES	• • •		_ ,
2. The Articles of Organizatio	n were filed on 8:00 AM MARCH 29, 2016	and assigned	
document number L1600006	52360		7 2
Note: If the date inserted in t	the dissolution if not effective on the date of filing: date cannot be prior to or more than 90 days later than date dethis block does not meet the applicable statutory filing retrive date on the Department of State's records.	DEBINGHE IS ICCCIVE	
4. A description of occurrence 605,9707, Florida Statutes, 1	that resulted in the limited liability company's dis copy 605.0707 on back cover letter	tion pursu	ant to section
7 - Klanned 2 - Business	Expiration. 3 Purpose Completi	edo	
3- Low (ash Flow.		
5. If there are no members, en activities and affairs:	ter the name and address of the person appointed to RAMON M CONTRERAS (MGR)	o wind up the c	company's
	YOLIENNY CONTRERAS (MGR)		
	2900 N 24th AVE APT 6207, HOLLYWOOD FLOR	IDA 33020	
6. Signature of an authorized plisted above to wind up the cor	person or if there are no members, the signature of mpany's activities and affairs:	the person app	ointed and
oul / Y	RAMON & YOLIENNY		
Signature	FILING FEE: \$25.00	Name	

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: RAIVIAJECO ENTERPRIS	ES LI	<u>دن</u>
Document number of Limited Liability Company is: L16000062360	<u></u>	是
Date of dissolution was: 12/10/2018	77 v.	=
Description of information that must be included in a written claim:		<u>}</u>
Causes of dissolution: Agreement of the General Board of Partn	ers 🖟	2 8
The companies must be dissolved for the following reasons:		
1For the cessation in the exercise of the activity or activities that constitute the corporate	purpose.	
2Because of the manifest impossibility of achieving the social of	joal.	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corp	orations)	
2900 N 24th AVE APT 6207		
HOLLYWOOD FLORIDA 33020		

RAMON CONTRERAS

Printed Name of the Person Filing

claim is commenced within 4 years after the filing of this notice.

Signature of the Person Filing

A claim against the above named limited liability company will be barred unless a proceeding to enforce the