

L16 000 122157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

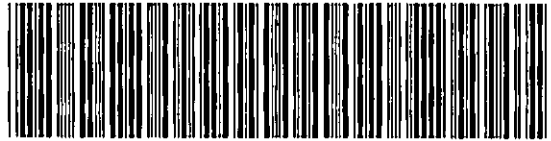
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2019 APR 17 AM 9:36

EFFECTIVE DATE
April 30, 2019

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APR 26 2019

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRSFlowers and Gifts 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:

Sandra P Rojas

(Name of Person)

CRSFlowers and Gifts LLC

(Firm/Company)

16048 SW 143th St

(Address)

Miami, FL, 33196

(City/State and Zip Code)

For further information concerning this matter, please call:

Sandra P. Rojas

(Name of Person)

at (786) 338-8910

(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

EFFECTIVE DATE
April 30, 2019

1. The name of a limited liability company is
CRSIFlowers and Gifts LLC

2. The Articles of Organization were filed on April 9th, 2019 and assigned
document number L16000122157

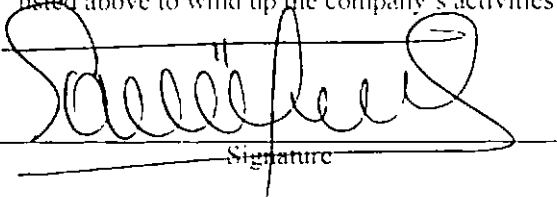
3. The delayed effective date the dissolution if not effective on the date of filing: April 30th, 2019
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, 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).
Out 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: Sandra P. Rojas 16048 SW 143th ST, Miami, FL, 33196

Carlos A. Ruiz 16048 SW 143th St, Miami FL 33196

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

Sandra P. Rojas

Printed Name

FILING FEE: \$25.00

2019 APR 17 AM 9:36