

216000151490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

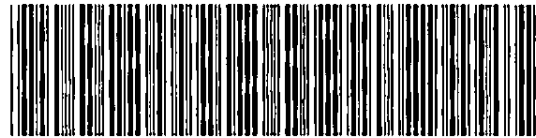
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500317430785

SEP. 14

08/27/18--01007--021 \*\*25.00

FILED  
2018 SEP 14 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FL

WLS  
9-21-18



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 4, 2018

CHRISTOPHE A SOLDAT  
3186 NEW YORK STREET  
MIAMI, FL 33313 US

SUBJECT: FRACOL GROUP, LLC  
Ref. Number: L16000151490

We have received your document for FRACOL GROUP, 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):

The Notice of Dissolution must contain a description of information that should be included in a written claim.

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

Please return the corrected original and one copy of 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.

Janeice L Smith  
Regulatory Specialist II  
Registration Section

Letter Number: 018A00017975

2018 SEP 14 AM 10:33

RECEIVED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FRACOL GROUP 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:

CHRISTOPHE A SOLDAT

(Name of Person)

REGISTERED AGENT

(Firm/Company)

3186 NEW YORK STREET

(Address)

MIAMI FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

CHRISTOPHE SOLDAT at 305 303-0281  
(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

FRACOL GROUP LLC

2. The Articles of Organization were filed on 08/12/2016 and assigned

document number L16000151490

3. The delayed effective date the dissolution if not effective on the date of filing: 08/12/2016  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

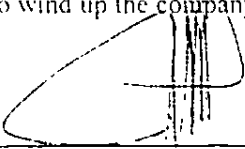
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Lack of business for the next 6 months.

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

CHRISTOPHE SOLDAT

Printed Name

**FILING FEE: \$25.00**

2018 SEP 14 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FL

**FILED**

## 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: FRACOL GROUP LLC

Document number of Limited Liability Company is: L16000151490

Date of dissolution was: 08/12/2016

Description of information that must be included in a written claim:

Contract # , invoice # , date of product/service  
sold , amount in USD ✓

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

FRACOL GROUP LLC  
c/o Christopher Soldat  
3186 NEW YORK ST  
MIAMI, FL 33133

2018 SEP 14 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

CHRISTOPHER SOLDAT

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00