L16000 153777

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT M	AIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status _					
Special Instructions to Filing Officer:					
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Office Use Only



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COVER LETTER

TO:

Registration Section Division of Corporations

EDY TILE & FLOORING 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:

ANGEL DIEZ					
(Name of Person)					
DBS DIEZ BUSINESS SERVICES INC					
(Firm/Company)					
4125 W WATERS AVE					
(Address)					
TAMPA, FL 33614					
(City/State and Zip Code)					

For further information concerning this matter, please call:

ANGEL DIEZ

(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				
	EDY TILE & FLOORING LL	C		·	
2.	The Articles of Organization	n were filed on	6 ar	nd assigned	
	document number L160001	53777	-		
3.	The delayed effective date to (effective Note: If the date inserted in the listed as the document's effective date to (effective note).	his block does not meet the	applicable statutory filing requ	iment is received for filing) irements, this date will not be	
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). Business Fall Out				
	BUSINESS FALL	OuT			
				<u> </u>	
5.	. If there are no members, en	ter the name and address	of the person appointed to v	wind up the company's	
	activities and affairs:	EDSON MARTINS RA	MOS	<u>်</u>	
		8741 WATERWAY DR			
		TAMPA, FL 33635		9	
6 li	. Signature of an authorized sted above to wind up the con	person or if there are no meany's activities and af	members, the signature of the fairs:	e person appointed and	
		•	EDSON MARTINS RAMO	S	
	Signature		Printed N	ame	
		FILING I	FEE: \$25.00		

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

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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: EDY TILE & FLOORING LLC					
ocument number of Limited Liability Company is: L16000153777					
Date of dissolution was: 09/29/2016					
Description of information that must be included in a written claim:	16 007				
NAME, ADDRESS, PHONE, REASON FOR CLAIM	1 4				
DATE OF OCCURENCE, PARTIES INVOLVED					
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corpor	ations)				
8741 WATERWAY DR					
TAMPA,FL 33635					

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

Signature of the Person Filing

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.

EDSON MARTINS RAMOS

Printed Name of the Person Filing