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(F	Requestor's Name)					
(A	Address)					
<u> </u>	Address)					
(0	City/State/Zip/Phone #)					
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates of	Status				
Special Instructions to Filing Officer:						

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COVER LETTER:

TO: Registration Section Division of Corporations

Fistel Realty, LLC

SUBJECT

(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:

Liliana Fistel	
(Name o	of Person)
Fistel Realty, LLC	
Oceanic Ave.	Company)
(Ade	dress)
Lauderdale By The	W-7
(City/State a	and Zip Code)
For further information concerning this matter, please call:	· -
Liliana Fistel	_at 954 <u>562-1129</u> <u>=</u>
(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 liabili Fistel Realty, LLC	ty company is			·		
2.	The Articles of Organization	were filed on Septen	September 27, 2016 and assigned				
	document number L1600017	9756					
3.	The delayed effective date the dissolution if not effective on the date of filing: (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 605.0707, Florida Statutes, (c	that resulted in the lin copy 605.0707 on back	nited liability company's di k cover letter).	ssolution pursi	ant to section		
	I am the Qualifying Broker for						
	I intend to work for another F	· · ·			59 <u>2</u>		
	A Real Estate firm without Qu		· · · · · · · · · · · · · · · · · · ·		E		
5.	If there are no members, enter activities and affairs:	er the name and addre Liliana Fistel, MGR	ss of the person appointed	to wind up the	company's		
		267 0cm	nic Ave	· · · · · · · · · · · · · · · · · · ·	ر ّ 		
		fort laur	lendale fi 3330	8			
6. lis	Signature of an authorized pattern above to wind up the com	erson or if there are no	o members, the signature of	f the person ap	pointed and		
	Tital)	Tel	Liliana	a Fis	-tel		
	Signature		Printed	l Name			

FILING FEE: \$25.00