

L16000204947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

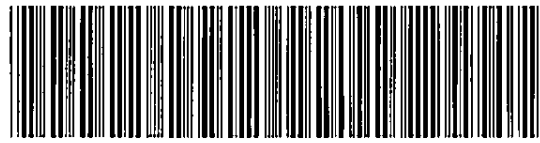
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000307437020

RECEIVED
DEPARTMENT OF STATE
18 JAN 31 AM 4: 21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
18 JAN 31 AM 9: 02
STATE

© SIMMONS

FEB 08 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 1, 2018

CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: AREAS USA SLC, LLC
Ref. Number: L16000204947

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

Please enter address of the person appointed to wind up company's affairs.

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

Octavia L Simmons
Regulatory Specialist II

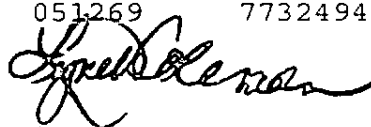
Letter Number: 618A00002140

DEPT. OF STATE
TALLAHASSEE, FLORIDA

2018 FEB - 7 AM 10:46

RECEIVED

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 051269 7732494
AUTHORIZATION : 
COST LIMIT : \$ 25.00

ORDER DATE : January 31, 2018
ORDER TIME : 2:37 PM
ORDER NO. : 051269-020
CUSTOMER NO: 7732494

DOMESTIC FILINGS

NAME: AREAS USA SLC, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Areas USA SLC, 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:

Arevis Piedra

(Name of Person)

Areas

(Firm/Company)

5301 Blu Lagoon Dr. #690

(Address)

Miami, FL 33126

(City/State and Zip Code)

For further information concerning this matter, please call:

Arevis Piedra

(Name of Person)

at (305) 267.8510

(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
Areas USA SLC, LLC

2. The Articles of Organization were filed on 11/07/2016 and assigned
document number L16000204947

3. The delayed effective date the dissolution if not effective on the date of filing: 01/01/2018
(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.

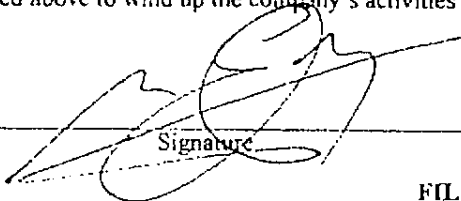
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
no longer in operation

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: CEO and Manager- Sergio Rodriguez

5301 Blue Lagoon Drive, #690

Miami, FL 33126

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

Sergio Rodriguez

Printed Name

FILING FEE: \$25.00

18 JAN 31 AM 9:07