L16000210553

(Re	questor's Name)			
(Address)				
DA)	dress)			
(Cit	y/State/Zip/Phone	= #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



900307339519

900307339519 01/03/18--01023--022 **25.00

SECRETARY OF SIALE DIVISION OF CORPORATIONS

18 JAN - 9 PM 3: 15

K. SALY JAN 10 2018

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Brick City Vending LLC (Name of Limited Liability Company)					
(Calle of Eliment Business Collegenty)					
The enclosed Articles of Dissolution and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Miguel Ramon					
(Name of Person)					
(Firm/Company)					
1535 SW 78th Ct					
(Address)					
Miami FL 33144					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
Miguel Ramon at (305) 220-3203 (Name of Person) at (305) 220-3203 (Area Code & Daytime Telephone Number)					
(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee and Certificate of Dissolution \$\sum \text{S55.00 Filing Fee. Certificate of Dissolution & Certified Copy (additional copy is enclosed)}\$					

MAILING ADDRESS:

TO:

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 liabil	ity company is		10 JAN -9 PM 3
Back Ci	tu Vendi	na, LLC	<i>'ៗ</i> ភូ
2. The Articles of Organization	n were filed on	17 2016	and assigned
document number	6000210	2553	, ,
	date cannot be prior to or i his block does not meet	more than 90 days later than the applicable statutory fi	iling: 1518 date document is received for filing) ling requirements, this date will not be
. A description of occurrence 605.0707, Florida Statutes, (that resulted in the lir copy 605.0707 on bac	mited liability company k cover letter).	's dissolution pursuant to section
Unsuccess	sful b	usiness	
. If there are no members, ent	er the name and addre	ess of the person appoin	ited to wind up the company's
	1535	SW 78H	Court
	Miqui	FL 3	3144
. Signature of an authorized p sted above to wind up the con	person or if there are n npany's activities and	o members, the signatu affairs:	re of the person appointed and
Mysulfara- Signature	<u> </u>	Miguel	Ramon nted Name
	FILING	FEE: \$25.00	