

11000222274

(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



300319844763

10/24/18--01023--016 \*\*25.00

FILED  
18 OCT 24 AM 3:40  
SOUTH FLORIDA  
TALLAHASSEE, FLORIDA

K. SALY  
NOV 6 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Indira Active, 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:

Richard Sierra

(Name of Person)

Florida Small Business Legal Center

(Firm/Company)

6810 N. State Rd 7

(Address)

Coconut Creek, FL 33073

(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Sierra

(Name of Person)

at ( 954 ) 757-1919

(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**

**FILED**  
**18 OCT 24 AM 3:40**  
SEALING UNIT  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Indira Active, LLC

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

document number L16000222274

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 that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Pursuant to the consent of all Members

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

Michael Sierra

6583 NW 127TH TERR

PARKLAND, FL 33076

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

Michael Sierra

Printed Name

**FILING FEE: \$25.00**

## Notice of Limited Liability Company Dissolution

FILED  
18 OCT 24 AM 3:41  
SEALING  
TALLAHASSEE, FLORIDA

**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: Indira Active

Document number of Limited Liability Company is: L16000222274

Date of dissolution was: Filing Date

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

Description of the Claim

Amount

Date the claim accrued

Invoice or Documents which support the claim.

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

Florida Small Business Legal Center

6810 N. SR 7

Coconut Creek, FL 33073

Attn: Richard Sierra

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.

Michael Sierra

Printed Name of the Person Filing



Signature of the Person Filing