117000003700

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

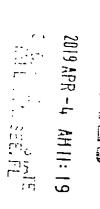
Office Use Only



800325583408

03/06/19--01021--001 **25.00

R. WHITE



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: EMILY TRASE L	LC
DOCUMENT NUMBER: L17000	
The enclosed Notice of Limited Liability	Company Dissolution and fee are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
ANTONELLA SACCON	11
(Name of	Contact Person)
EMILY TRASE LLC	
(Fin	n/Company)
4718 CHRISTA CT UN	NIT 313
•	ddress)
TAMPA, FL 33614	
(City/Sta	ite and Zip Code)
For further information concerning this ma	tter, please call:
ANTONELLA SACCON	11 at (813) 830 3783
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	ınt:
□\$25 Filing Fee □ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & ☐ \$60 Filing Fee, Certified Copy Certificate of Status & (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



March 18, 2019

ANTONELLA SACCONI 4718 CHRISTA CT UNIT 313 TAMPA, FL 33614

SUBJECT: EMILY TRASE LLC Ref. Number: L17000003700

We have received your document for EMILY TRASE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The notice of dissolution cannot be filed on an active LLC. You may dissolve the entity first and then file the notice of dissolution.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

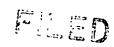
Letter Number: 119A00005209

Rebekah White Regulatory Specialist III

19 APR -4 AM 11:38

www.sunbiz.org

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



l.	The name of a limited liabilit		1 1 C.	2019 APR -4 AHII: 19
2.	The Articles of Organization			TOLL A SEE, FL
	document number			
3.		late cannot be prior is block does not	to or more than 90 days later that meet the applicable statutory t	filing: n date document is received for filing) Ifing requirements, this date will not be
4.	A description of occurrence to 605.0707, Florida Statutes, (c. NO LONER (ору 605.0707 с	m back cover letter).	y's dissolution pursuant to section
5.	If there are no members, ente activities and affairs:	r the name and	address of the person appoi	nted to wind up the company's
6. lis	Signature of an authorized posted above to wind up the com	erson or if there pany's activitie	are no members, the signat s and affairs:	ure of the person appointed and
/c	n tonella Scurini Signature		Anto	rolla Sacconi

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

This notice is submitted by the dissolved limited liability company named below for resolution of payment of a unknown claims against this limited liability company as provided in s. 605.0712 F STA:

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: EMILY TRASE LLC
Document number of Limited Liability Company is: L1700003700
Date of dissolution was: 12.31 2-018
Description of information that must be included in a written claim:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
4718 CHRISTA CT UNIT 313
TAMPA, FLORIDA 33614
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.
commenced within 4 years after the riting of this house.
ANTONELLA CACCONI
ANTONELLA SACCONI Infontilla Summi
Printed Name of the Person Filing Signature of the Person Filing