

U7000 119980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

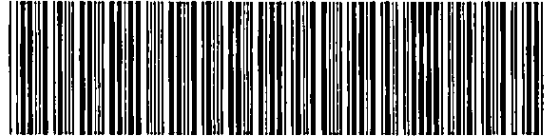
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900309048679

02/15/18--01008--002 \*\*25.00

FILED

18 FEB 15 PM 4:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
FEB 16 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Garcia & Mendez Construction, 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:

Rosalia Garcia / Byron Mendez.  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

90 NW 17 PLACE #1  
(Address)

MIAMI - FL 33125  
(City/State and Zip Code)

For further information concerning this matter, please call:

Rosalia M. Gomez G. at (786) 877 4025  
(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

FILED  
18 FEB 15 PM 4:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Garcia & Mendez Construction, LLC

2. The Articles of Organization were filed on 12/1/17 and assigned

document number L17000119980

3. The delayed effective date the dissolution if not effective on the date of filing: 2/1/18  
(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).

Didn't go as expected, barely worked  
AND end up w/ loss.

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

Rosalba Garcia / Byron Mendez  
90NW17 place #1  
Miami - FL 33125  
786 879 41025

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

Rosalba Garcia  
Printed Name

FILING FEE: \$25.00