

L17000138536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

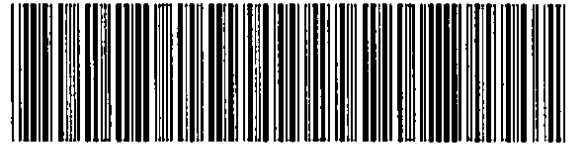
(Business Entity Name)

(Document Number)

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

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03/18/2020 11:48 AM \*4.00

20 FEB 27 PM 1:48

MAR 27 2020  
C. McNAIR

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TFE ENTERPRISES FLORIDA LLC

(Name of Limited Liability Company)

20 FEB 27 PM 1:48

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAGALY REY

(Name of Person)

TFE ENTERPRISES FLORIDA LLC

(Firm/Company)

3981 E HIBISCUS ST

(Address)

WESTON, FL 33332

(City/State and Zip Code)

For further information concerning this matter, please call:

MAGALY TERAN

954

870-9393

at ( )

(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

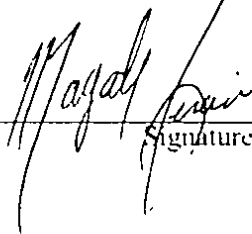
**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

20 FEB 27 PM 1:48  
CLERK OF THE COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT

1. The name of a limited liability company is  
TFE ENTERPRISES FLORIDA LLC
2. The Articles of Organization were filed on 06/16/2017 and assigned  
document number L17000138536
3. The delayed effective date the dissolution if not effective on the date of filing: 02/01/2020  
(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).  
The partners do not want to run this business any more  
The partners do not want to run this business any more  
The partners do not want to run this business any more
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs:
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

MAGALY REY

Printed Name

**FILING FEE: \$25.00**