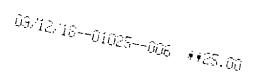
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(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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T. CLINE

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EXAMINER

COVER LETTER

TO: Registra

Registration Section Division of Corporations

FLA ADMINISTRATION GROUP LLC

SUBJECT:

(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:

PETER D. DEL TORO, ESQ.

(Name of Person)

THE DEL TORO LAW GROUP LLC

(Firm/Company)

73 SW FLAGLER AVENUE

(Address)

STUART, FLORIDA 34994

(City/State and Zip Code)

For further information concerning this matter, please call:

PETER D. DEL TORO 844

900-7383

(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 enclose)

C TSS

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER A

Registration Section
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

		A LIMITED LIABILITY COMPAN	Y 3 5
۱.	The name of a limited liability		· · · · · · · · · · · · · · · · · · ·
2.	The Articles of Organization	were filed on	and assigned
	document number L1700018	4195	
3.	(effective c Note: If the date inserted in th	e dissolution if not effective on the date of late cannot be prior to or more than 90 days later tha is block does not meet the applicable statutory we date on the Department of State's records.	n date document is received for filing)
4.	A description of occurrence to 605,0707, Florida Statutes, (c	hat resulted in the limited liability compar opy 605.0707 on back cover letter).	y's dissolution pursuant to section
	COMPANY WAS FILED UND	ER FRAUDULENT PRETENSES. COMP	PANY LISTED DANIEL E. HESS
	UNAWARE THIS ENTITY W.	AS ESTABLISHED WITH HIM AS A MEMB	
		FFIDAVIT AND COVER LETTER	
5.	If there are no members, ente activities and affairs:	r the name and address of the person appo	inted to wind up the company's
6. lis	Signature of an authorized peted above to wind up the com	erson or it there are no members, the signal pany's activities and affairs:	ure of the person appointed and
	(INT)	PETER D. DEL T	ORO, ESQ.
	Signature	F	rinted Name

FILING FEE: \$25.00