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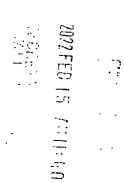
(Re	equestor's Name)				
(Address)						
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PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
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COVER LETTER

	stration Section sion of Corporations						
National Construction and Landscaping LLC SUBJECT: (Name of Limited Liability Company)							
Please return a	all correspondence concerning this matter to	the following:					
	Maria Lopez, Esq.						
	(Na	me of Person)					
	Gallardo Law Firm						
	(Firm/Company)						
	8492 SW 8th Street						
		(Address)					
	Miami, Florida 33144						
	(City/St	ate and Zip Code)					
For further inf	ormation concerning this matter, please call	l:					
Arley Ramos		305 213-3014					
(Name of Person)		at () (Area Code & Daytime Telephone Number)					
Enclosed is a ch	neck for the following amount:						
\$25.0	■ \$25.00 Filing Fee and Certificate of Dissolution □ \$55.00 Filing Fee, Certificate of Di Certified Copy (additional copy i						
	ing Address:	Street Address:					
	istration Section sion of Corporations	Registration Section Division of Corporations					
	Box 6327	The Centre of Tallahassee					
Talla	ahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303					

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited li	iability company is			
NATIONAL CONSTRU	CTIO AND LANDSCAPIN	G LLC		
2. The Articles of Organiz	ation were filed on 09/18.	2017	and assigned	
document number L170	000193723			
Note: If the date inserted	ate the dissolution if not e etive date cannot be prior to or I in this block does not meet effective date on the Departi	the applicable statutory	in date document is receiv	
4. A description of occurre	ence that resulted in the li	mited liability compan	y's dissolution pursu	ant to section
605.0707, Florida Statut	es, (copy 605,0707 on ba	ck cover letter).	-	- ⁽⁾ 55
Decision to dissolve the bi	usiness by owner.		_	
Decision to dissolve the bu	isiness by owner.			= = = = = = = = = = = = = = = = = = = =
Decision to dissolve the bu	siness by owner.			
5. If there are no members activities and affairs:	, enter the name and addr Arley Ramos	ess of the person appoi	inted to wind up the c	company's
	2611 SW 112 COUR	Т		
	MIAMI, FL 33165			
6. Signature of an authoriz above to wind up the comp	ted person or if there are reany's activities and affair	o members, the signat s:	ure of the person app	ointed and listed
(initial)	<u></u>	A DA ENGO ANAGO		
	•	ARLEY RAMOS	/1 Printed Name	
Signatur	C	1	TIMEA INAING	

FILING FEE: \$25.00