# 417000196090

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(Cit	y/State/Zip/Phone	: #)	
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SECRETARY OF STATE
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### COVER LETTER

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TO: Amendment Section Division of Corporations

SUBJECT: DJ AIT LLC	
The enclosed Articles of Dissolution and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:	2018 JUL -2 AH 11:44
Name of Contact Person)	1:44
2339 Bahayes CT (Address)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (Mol — 485 – 38 (Area Code) (Daytime Telephone Num	. <u>51</u> 1ber)
Enclosed is a check for the following amount:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (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 14, 2018

DIANA MEDINA 2339 BAHAMAS CT KISSIMMEE, FL 34741

SUBJECT: D J AIR LLC

Ref. Number: L17000196090

We have received your document for D J AIR LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Florida LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 318A00005145

Octavia L Simmons Regulatory Specialist II

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DEPARTMENT OF STATE DIVISION OF CORPORATE TALLAHASSEE, PLOAT

## **COVER LETTER**

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TO: Amendment Section Division of Corporations	
SUBJECT: DJ Air	- LLC
DOCUMENT NUMBER:	000 1960 90
The enclosed Articles of Dissolution and fe	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Name of C	Medina Contact Person)
N Z A17	LLC
2339 Bahay	MGS CT
Kissimmee	
For further information concerning this matt	ter, please call:
Siana Medina (Name of Contact Person)	at ( <u>MO7 – M85 – 385)</u> (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amoun	nt:
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  ☐ \$52.50 Filing Fee, Certified Copy (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

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

A STATE OF THE STA

1.	The name of a limited liability company is  DJAir HC		
2.	The Articles of Organization were filed on $931300$ and assigned		
	document number <u>117000190090</u>		
3.	The delayed effective date the dissolution if not effective on the date of filing:  (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).		
	Dissolution was approved by the shareholders through voting groups.		
	•		
	1 SEC. 10		
	If there are no members, enter the name and address of the person appointed to wind up the complex's activities and affairs:		
	E P		
	ORIDA ORIDA		
5. list	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:		
	Down P Hedus Blance P Media		
V	Signature Printed Name		

FILING FEE: \$25.00