# 

(Re	questor's Name)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
(Cit	ÿ/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		





01/12/18--01018--024 \*\*25.00

J. LEGGETT APR 10 2018



## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 16, 2018

DAVID J TORRES ALMODOVAR 509 LAKE EAGLE LN SANFORD, FL 32773 US

SUBJECT: TORRES CONSULTING, LLC

Ref. Number: L17000248962

We have received your document for TORRES CONSULTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution for a Florida limited liability company must comply with section 605.0707, Florida Statutes. For your convenience, we are enclosing the appropriate form and instructions.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Judy A Leggett Regulatory Specialist II Registration Section

Letter Number: 318A00000862

2018 APR 10 AM 10: 56
DEPARTMENT OF STATE
DIVISION OF CORPORATION

## **COVER LETTER**

TO: Registration Section Division of Corporations

TORRES CONSULTING, 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:

## DAVID J. TORRES ALMODOVAR

(Name of Person)

## TORRES CONSULTING, LLC

(Firm/Company)

## 509 LAKE EAGLE LN

(Address)

## SANFORD, FL 32773

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID J TORRES ALMODOVAR at (787 J 403-8477 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

👺 525 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

Tovres Consulting, LLC
<b>!</b> ]
2. The Articles of Organization were filed on 12 5 2017 and assigned
document number <u>L17000248962</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).
THE OWN ERShip OF Torves Consulting, LC
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: DAUID -J- Torves Almadovar
509 Lake Eagle LN.
SANFORD FL 32773
5: 23
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;
DAVID J. TOVVES ALWOODVAN  Signature  Printed Name  FILING FEE: \$25.00

## Notice of Limited Liability Company Dissolution

## **NOTE:** This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

TORRES CONSULTING LLC

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company:	
Document number of Limited Liability Company is:	L17000248962
Date of dissolution was: 01/01/2018	
Description of information that must be included in a v	written claim:
THE OWNERSHIP OF TORRES CONSULTING, LLC	DECIDED TO CEASE BUSINESS OPERATIONS.
Mailing address where claims can be sent: (Claims can	anot be sent to the Division of Corporations)
509 LAKE EAGLE LN	
SANFORD, FL 32773	
	·

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

DAVID J TORRES ALMODOVAR

Printed Name of the Person Filing

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00