118000022243

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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SNOMMAR ON SIDE STANDER

COVER LETTER

TO:	Registration So Division of Co					
CHD		-	ALFA	VEHICLES L	LC	
SUD	IECT:	No	ime of	Limited Liabil	ity Company	
Dear	Sir or Madam:					
The e	nclosed Statemer	nt of Termination	and fee	(s) are submit	ted for filing.	
Pleas	e return all corres	spondence concert	ning thi	s matter to the	following:	
JOR	GE SALCEDO,	ESQ				
	1	Name of Person				
SAL	CEDO ATTORN	IEYS AT LAW P	.A.			
		Firm/Company				
200 \$		LVD, SUITE 270	00			
		Address				
MIAI	ИI, FL, 33131					
	Citv/St	ate and Zip Code				
JSAL	.CEDO@LAWJ	SH.COM				
E-m	ail address: (to b	e used for future a	nnual r	eport notificat	ion)	
For fu	ırther informatio	n concerning this	matter,	please call:		
JOR	GE SALCEDO,	ESQ	:1	305	3750640	
	Name of P	erson	``		Daytime Telephone Nu	mber
		URIER ADDRES	SS:		G ADDRESS:	
	Registration Section Division of Corporations			Registration Section Division of Corporations		
	Clifton Buildir	•		P.O. Box		
		e Center Circle		Tallahas	see Florida 32314	

CR2E141 (2/14)

Tallahassee, Florida 32301

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Stat		
FIRST: The name of the limited liability co	ompany is:	
SECOND: The Florida Document number of	of the limited liability company is: L18	3000022243
THIRD: The date of filing of the initial arti	cles of organization is:JANUARY 24	l, 2018
FOURTH: The date of filing of the dissolu	tion is: MAY 24, 2018	·
FIFTH: This limited liability company has that it will file a statement of termination.	completed winding up its activities and	l affairs and has determined
	JUAN MAIZO	18 JIN 11 FN 12 OF
Signature of Anthorized Representative		e Z
Certi	Filing Fee: \$25.00 ified Copy: \$30.00 (optional)	12 DF

CR2E141 (2/14)