

L18 0000 23 491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

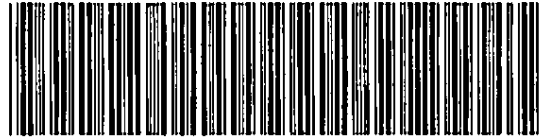
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer: v

Office Use Only



700326511537

04/05/19--01012--006 \*\*25.00

2019 SEP 23 PM 5:00  
FILED  
AND  
RECEIVED

T GLASS  
SEP 24 2019

RECEIVED  
SEP 23 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DE JESUS APPLIANCES LLC  
(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:

MANUEL MARTINEZ

(Name of Person)

(Firm/Company)

813 Bucklebury Loop

(Address)

Apopka, FL 32703

(City/State and Zip Code)

2019 SEP 23 PM 5:00

APPROVED  
FILED

For further information concerning this matter, please call:

MANUEL MARTINEZ at ( 305 ) 975 6489  
(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 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

1. The name of a limited liability company is  
DE JESUS APPLIANCES LLC

2. The Articles of Organization were filed on 01/25/2018 and assigned  
document number: 18000023481

3. The delayed effective date the dissolution if not effective on the date of filing: 10/27/2018  
(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).  
ATTACHED


I Moved to another city because  
Lack of work. I already Filed  
2018 Taxes.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: MANUEL MARTINEZ

813 Bucklebury Loop  
Appka, FL 32703

CEL 305.975.6489

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:



MANUEL MARTINEZ

Printed Name

FILING FEE: \$25.00

2019 SEP 23 PM 5:00

APPROVED  
AND  
FILED