11800 031 892

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
		
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

SUBJECT: BRAHMTEK SOFT WARE 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:		
BRIAH MANAND 50GA1 (Name of Person)		
BRAHMTEK SOFT WARE LLC		
7910 Camina Roul		
M/Am1 FL 33/43 (City/State and Zip Code)		
For further information concerning this matter, please call:		
RAHMANANO JOGA / at (786) 906 0058 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount: 2 \$25.00 Filing Fee and Certificate of Dissolution 2 \$55.00 Filing Fee, Certificate of Dissolution		
Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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
	BRAHMIEK SOFTWARE LLC
2.	The Articles of Organization were filed on <u>Feb 7, 2018</u> and assigned
	document number $1 / 8 000 3/892$
3.	The delayed effective date the dissolution if not effective on the date of filing: AUG 16, 2019 (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).
	I HAVE NOT RECEIVED COMPRACT WORK FOR
	MORE THAN AYEAR. NO MONEY IS COMING IN. THE BUSINESS HAS BEEN A COMPLETE
	FAILURE.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: BRAHMAND JOGAL D
	7910 CAMINO REAL
	MIAMI, FL 33/43
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
	B. Azzai BRAHMANAND JOGAI Signature BRAHMANAND JOGAI

FILING FEE: \$25.00