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SECRETARY OF STATE ALLAHASSEE, FIORING

MAR 2 1 2020

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: ARZ 7 ENTER BRISES 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:
PARCEL GERINK
(Name of Person)
_L 1800m 55320
(Firm/Company)
PO Box 844
(Address)
City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
TARUEL SKERINK at 305, 849-0543
(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 Address:
Registration Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  ARZ TENTED PRISES  LC
2.	The Articles of Organization were filed on MARCH 320 Lob and assigned
	document number <u>L 18006055320</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).
	Financial Deapons with Europe TRACE.
	AR AR
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	02
6. al	Signature of an authorized person or if there are no members, the signature of the person appointed and listed pove to wind up the company's activities and affairs:
	He fermi ARCEL KAFERINK Signature Printed Name
	FILING FEE: \$25.00