

L18 000126830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

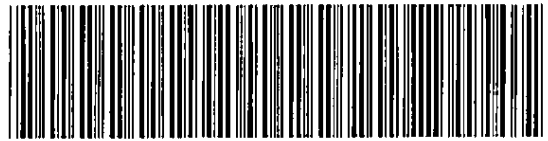
(Document Number)

Certified Copies _____ Certificates of Status _____

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S. CHATHAM

AUG - 8 2023

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2023 AUG -3 AM 7:56



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2023

ADOLFO D. LOPEZ
15388 SW 113TH TER
MIAMI, FL 33196-4363 US

SUBJECT: LOSCH, LLC
Ref. Number: L18000126830

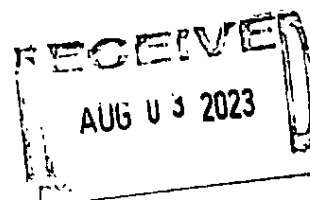
We have received your document for and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Profit Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham
Regulatory Specialist III
Director's Office

Letter Number: 323A00015964



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOSCH, 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:

ADOLFO D. LOPEZ
(Name of Person)

LOSCH, LLC
(Firm/Company)

15388 SW 113 TER
(Address)

MIAMI FL 33196
(City/State and Zip Code)

For further information concerning this matter, please call:

ADOLFO D. LOPEZ at (214) 682 9714
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

CHECK FOR \$35 PREVIOUSLY SENT.

☐ \$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

LOSCH, LLC

2. The Articles of Organization were filed on 5.21.2018 and assigned

document number L18000 126 830

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).

CORPORATION IS NO COMPANY IS NO LONGER IN
BUSINESS. ASSETS DISPOSED OF AND OFFICER
RETIRED.

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

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:



Signature

ADOLFO D LOPEZ

Printed Name

FILING FEE: \$25.00

CHECK FOR \$35
PREVIOUSLY SENT

2023 AUG -3 AM 7:56