# L18000201180

(Requestor's Name)
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## **COVER LETTER**

TO: Registration Section Division of Corp			
SUBJECT: LUDASO	INVESTMENTS, LLC		
	(Name of Li	mited Liability Company)	<del></del>
	Dissolution and fee(s) are submodence concerning this matter		
AN	DRES BAZO		
	(1)	Same of Person)	
RASCO	KLOCK PEREZ & NIETO, P	.L.	
		irm/Company)	
2555 P	ONCE DE LEON BLVD SUITE	600	
		(Address)	
CORAL	GABLES FL 33134		
	(City/S	State and Zip Code)	
For further information con	cerning this matter, please ca	11:	
ANDRES BA	AZO	at ( 305 ) 4767100	
(	Name of Person)	(Area Code & Daytime Telephone Number)	_ :
Enclosed is a check for the foll	owing amount;		<del></del>
S25.00 Filing Fee and Certificate of Dissolution		☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	1.00 TV
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	4.10: P.C

### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited lia	bility company is				
LUDASO INVESTME	NTS, LLC				
The Articles of Organiza	tion were filed on	08/22/2018	and assigned	i	
document numberL186	000201180				
The delayed effective date (effective Mote: If the date inserted listed as the document's effective date.	ave date cannot be prid in this block does no	or to or more than 90 days la of meet the applicable stat	ter than date document is received to the state of the st	ved for filing)	
A description of occurren 605.0707, Florida Statutes	ice that resulted in s, (copy 605.0707)	the limited liability coron back cover letter).	mpany's dissolution pursu	ant to section	
IN ACCORDANCE WITH SEC			TUTES ALL THE MEMBERS (	OF THE LLC	
If there are no members, e activities and affairs:	enter the name and	l address of the person :	appointed to wind up the c	company's	
	2555 PONCE D	DE LEON BLVD SUITE 60	0 CORAL GABLES FL 3313	14	13 7FC
					7
Signature of an authorized ove to wind up the compan	person or if there v's activities and a	are no members, the si affairs:	gnature of the person appo	ointed and listed	61 :01184
Laprice	f.	,	0.11		<u>-</u>
Signature			Printed Name	<del></del>	

FILING FEE: \$25.00

## Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: LUDASO INVEST	TMENTS, LLC
Document number of Limited Liability Company is:	L18000201180
Date of dissolution was: 12/09/2019	_
Description of information that must be included in a wr	ritten claim:
NATURE OF CLAIM; CLAIMANT'S NAME AND ADDRESS; AM	OUNT OF CLAIM
Mailing address where claims can be sent: (Claims canno	ot be sent to the Division of Corporations)
2555 PONCE DE LEON BLVD SUITE 600 CORAL G	SABLES FL 33134
A claim against the above named limited liability compandaim is commenced within 4 years after the filing of this	y will be barred unless a proceeding to enforce the notice.
Lucy CHNEZ	Library
Printed Name of the Person Filing	Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00