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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6393

From:

Account Name : FLL BUSINESS SOLUTION CORP
Account Number : 123190000092
Phone : (754) 202-8663
Fax Number : (786) 636-3620

LLC DISSOLUTION OR WITHDRAWAL
BETEL CONSULTING LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2020 JUN 25 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JUN 26 2020

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BETEL CONSULTING 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:

XIANNY CHINCHILLA

(Name of Person)

FLL BUSINESS SOLUTION CORP

(Firm/Company)

8360 W STATE RD 84

(Address)

DAVIE, FL 33324

(City/State and Zip Code)

For further information concerning this matter, please call:

XIANNY CHINCHILLA

754

202-8663

at (

(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

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

BETEL CONSULTING LLC

2. The Articles of Organization were filed on 06/13/2019 and assigned

document number 119000156850

3. The delayed effective date the dissolution if not effective on the date of filing: 06/13/2019
(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).

THIS IS A VOLUNTARY DISSOLUTION TAKED BY THE OWNERS

THIS IS A VOLUNTARY DISSOLUTION TAKED BY THE OWNERS

THIS IS A VOLUNTARY DISSOLUTION TAKED BY THE OWNERS

5. If there are no members, enter the name and address of the person appointed to wind up the company

activities and affairs:

2020 JUN 25 PM 2:45
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TALLAHASSEE, FLORIDA

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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:

Rafael Long Rodriguez
Signature

RAFAEL LONG RODRIGUEZ

Printed Name

FILING FEE: \$25.00

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