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COVER LETTER

TO:	Registration Section Division of Corporations	•		
SUBJ	JAT DRIVING SOLUTIONS LIMITED LIAB	ILITY COMPA	NY	
3003	(Name of Limited	Liability Comp	any)	
	nclosed Articles of Dissolution and fee(s) are submitted return all correspondence concerning this matter to the	-		
	JUAN A ANDRADE			
(Name of Person)				
	JAT DRIVING SOLUTIONS LIMITED LIABILITY COMPANY			
	(Firm/Company)			
	30 HEATHER COVE DR			
	(Address)			
	BOYNTON BEACH, FL 33436			
	(City/State a	and Zip Code)	-	
For fu	rther information concerning this matter, please call:			
	JUAN A ANDRADE	561 at (853-7914	
	(Name of Person)		Code & Daytime Telephone Number)	
Enclose	ed 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		Street Address: Registration Section Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2071 (mm 23 M

1.	The name of a limited liability company is				
	JAT DRIVING SOLUTIONS LIMITED LIABILITY COMPANY				
2.	The Articles of Organization were filed on and assigned and assigned				
	document number L19000177087				
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 listed as the document's effective date on the Department of State's records.				
	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).				
	No longer doing bussiness				
	No longer doing bussiness				
	No longer doing bussiness				
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:				
	-				
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and li- ove to wind up the company's activities and affairs:				
	Juan A. Andrate Signature Printed Name				
	Signature Printed Name				

FILING FEE: \$25.00