

L19 000182313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

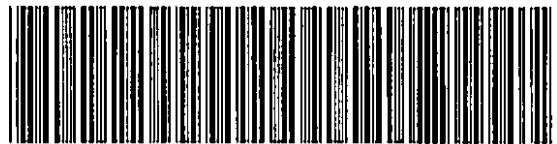
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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06/13/22--01011--010 ++25.00

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2022 JUN 13 PM 6:23  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

AUG 30 2022

S. PRATHER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MORALITO CAFE 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:

GLORIA I SANCHEZ

(Name of Person)

MORALITO CAFE LLC

(Firm/Company)

639 SW VERONICA AVE

(Address)

PORT ST LUCIE, FL 34953

(City/State and Zip Code)

For further information concerning this matter, please call:

GLORIA I SANCHEZ

772

323-8430

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

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

1. The name of a limited liability company is  
MORALITO CAFE LLC

2. The Articles of Organization were filed on 07/16/2019 and assigned  
document number L19000182313

3. The delayed effective date the dissolution if not effective on the date of filing: 05/01/2022  
(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).

The Dissolution is an official notification of end  
of a business relationship with the 'partners,  
vendors, clients and another party.

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. 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

GLORIA I SANCHEZ

Printed Name

**FILING FEE: \$25.00**

STATE  
TALLAHASSEE  
FLORIDA

2022 JUN 13 PM 6:23

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## 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: MORALITO CAFE INC

Document number of Limited Liability Company is: L19000182313

Date of dissolution was: 05/01/2022

Description of information that must be included in a written claim:

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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

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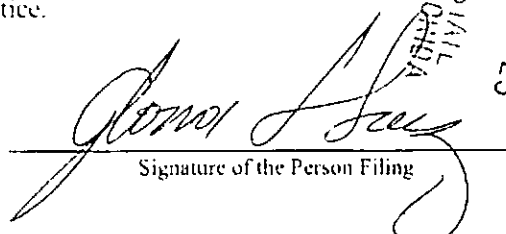
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A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

GLORIA I SANCHEZ

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**

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2022 JUN 13 PM 6:23  
TALLAHASSEE, FLORIDA