

L19000272648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

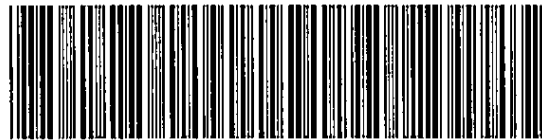
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300342440683

03/27/20--01000--007 ++25.00

FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS
20 MAR 27 PM 3:42

Dissolution

APR 09 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: XENEIZE TRANSPORTATION 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:

GABRIEL DICIANO

(Name of Person)

XENEIZE TRANSPORTATION LLC

(Firm/Company)

1227 WINDING WILLOW CT

(Address)

KISSIMMEE FL 34746

(City/State and Zip Code)

For further information concerning this matter, please call:

GABRIEL DICIANO

407

922-0538

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 MAR 27 PM 3:42

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

1. The name of a limited liability company is

XENEIZE TRANSPORTATION LLC

2. The Articles of Organization were filed on NOVEMBER 6, 2019 and assigned

document number L19000272648

3. The delayed effective date the dissolution if not effective on the date of filing: 3/25/2020
(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).

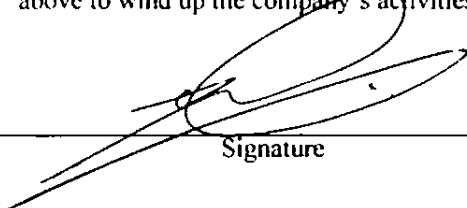
I GABRIEL DICIANO, ONLY PRESIDENT-OWNER-MEMBER, CONSENT TO CLOSE THE COMPANY.

I GABRIEL DICIANO, ONLY PRESIDENT-OWNER-MEMBER, CONSENT TO CLOSE THE COMPANY.

I GABRIEL DICIANO, ONLY PRESIDENT-OWNER-MEMBER, CONSENT TO CLOSE THE COMPANY.

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

GABRIEL DICIANO

Printed Name

FILING FEE: \$25.00

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
20 MAR 27 PM 3:42