

h20000002507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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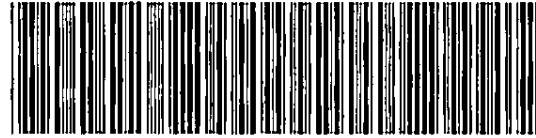
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TP 9141, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juan Barquero

Name of Person

Firm/Company

9141 SW 138th Place

Address

Miami, FL 33186

City/State and Zip Code

jbarq001@fiu.edu

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan Barquero at (786) 9067717  
Name of Person Area Code Daytime Telephone Number

**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

## STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

**FIRST:** The name of the limited liability company is: TP 9141, LLC

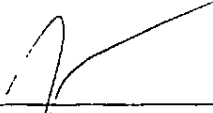
**SECOND:** The Florida Document number of the limited liability company is: 120000002807

**THIRD:** The date of filing of the initial articles of organization is: December 20, 2019

**FOURTH:** The date of filing of the dissolution is: April 20, 2021

**FIFTH:** This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

TP 9141, LLC has completed winding up and has determined it will file a statement of termination.

  
\_\_\_\_\_  
Signature of Authorized Representative

Juan Barquero  
\_\_\_\_\_  
Typed or printed name of signature

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TALLAHASSEE, FL

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)