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SECRETARY OF STATE
CHAINN OF CORPORATIONS

J DENINIS SEP 23 2021

## **COVER LETTER**

TO:	Registration Section Division of Corporations							
SUBJE	ITACOL MANAGEMENT LLC							
(Name of Limited Liability Company)								
	closed Articles of Dissolution and fee(s) are submit return all correspondence concerning this matter to	_						
VILMA Y FIESCO								
(Name of Person)								
	(Firm/Company)							
	5156 NW 116 CT							
	(Address) DORAL, FL 33178							
(City/State and Zip Code)								
For fur	ther information concerning this matter, please call:							
VILMA Y FIESCO (Name of Person)		786 4036798						
		at ()(Area Code & Daytime Telephone Number)						
Enclose	d 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

ι.	The name of a limited liability company is  FTACOL MANAGEMENT LLC						
2.	The Articles of Organization	were filed on $\frac{01/14/202}{}$	2	and assigned			
	document number L2200002	9902	_				
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 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).						
	COMPANY IS CLOSED						
	COMPANY IS CLOSED						
5.	If there are no members, ento activities and affairs:	nbers, enter the name and address of the person appointed to wind up the company's  Vilma Y Fiesco					
			•				
6. ab	Signature of an authorized pove to wind up the company	erson or if there are no n s activities and affairs:	nembers, the signature	of the person appointed and listed			
	Julite		Vilma Y Fiesco				
	Signature		Printe	ed Name			

FILING FEE: \$25.00