## L22000147013

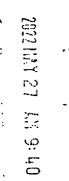
(Requestor's Name)								
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PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								
Special instructions to Filing Officer.								





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## **COVER LETTER**

Registration Section

TO:

Division of Corporations								
SUBJECT: Landant Transportinited (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:							
Antonia Rol	bles of Person							
(Firm Company)								
Saint Cloud FL 34771 =:								
Saint Cloud	FL 34771							
(City/State a								
For further information concerning this matter, please call:	1 I							
Antonio Robles	at ( 32 ) 732 - 0383 6							
(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	Street Address: Registration Section Division of Corporations							
P.O. Box 6327 Tallahassee, FL 32314	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 con		LL (	1			11/2	
2.	The Articles of Organization were				3077	and assigned		o
	document number <u>L 21000</u>	147013						0
3.	The delayed effective date the diss reffective date ca Note: If the date inserted in this blo listed as the document's effective date.	nnot be prior to c ck does not med	or more tha et the app	an 90 days late dicable statu	er than date o tory filing r	locument is receiv	ed for filing) is date will no	it be
4.	A description of occurrence that re 605.0707, Florida Statutes, (copy 6	605.0707 on b	ack cove	er letter).		•		n
	Business ne	عود -	400	k o	<u>ft</u>	unable	: 40	
	buy equipm	ent (T	ruck	<b>\</b>				
		•						
5.	If there are no members, enter the activities and affairs:	name and add			ppointed t	o wind up the	company's	
	_4	927 Em	ilex.	Grace	Lan	Saint C	land Fi	3477/
							<u> </u>	
6. ab	Signature of an authorized person sove to wind up the company's activities.	or if there are vities and affa	no men irs:	bers, the si	gnature of	the person app	oointed and l	isted
	7 2 M			<b>N</b>	1	D 11		
_	Signature		_	<u> </u>	Printed	Name	<del></del>	

FILING FEE: \$25.00