

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations Fax Number : (850)617-6383 Account Name : KIJOENNA SERVICES INC Account Number ; I20080000033 Phone : (305)644-3055 Fax Number : (305)644-3052 LLC DISSOLUTION OR WITHDRAWAL POLANCO RIJO & MILLAN INVESTMENTS LLC Certificate of Status 0 Certified Copy 0 Page Count 01 Estimated Charge \$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

T. LEMIEUX JUN 2 9 2023

	COVER LI	ETTER	
TO: Registration Section Division of Corporations			
POLANCO RIJO & MILL SUBJECT:	AN INVESTMENTS L	rc	
	(Name of Limited Lia	bility Company)	
The enclosed Articles of Dissolution and	d fee(s) are submitted for	filing.	
Please return all correspondence concern	ning this matter to the fo	llowing:	
NANCY RIJO			
	(Name of P	erson)	
	(Pirn/Con	pany)	
15555 MIAMI LAKES	DR NORTH #106		
	(Addres	38)	
MIAMI LAKE, FL 330			
	(City/State and	Zip Codc)	
For further information concerning this	matter, picase call:		
NANCY RIJO		7866125	925
(Name of Pers		at () (Area Code & Daytime	Telephone Number)
Tradead is a sheet far the fallowing	i		
Enclosed is a check for the following amount \$25.00 Filing Fee and Certificate		Teeroo Pitti . P	CYD! I !
= 323.00 Fining Fee and Certificate	or Dissolution	\$55.00 Filing Fee, Certifica Certified Copy (additional	
Mailing Address:		treet Address:	
Registration Section		egistration Section	
Division of Corporations P.O. Box 6327		division of Corporation The Centre of Tallahas	
Tallahassee, FL 32314		415 N. Monroe Street	
1 4.141.141.141.141	l l	allahassee, FL 32303	Suite 610
		,	
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	A	ARTICLES OF DIS FOR	SOLUTION		
	AL	IMITED LIABILI	TY COMPANY		
	ame of a limited liability co	• •			•
	articles of Organization wer			and assigned	
docur	nent number L23000156143				
Note	elayed effective date the dis (effective date c If the date inserted in this blo las the document's effective d	ock does not meet the ap	nan 90 days later than date doo plicable statutory filing rec	6/28/23 nument is received for filir uirements, this date wi	ig) Il not be
4. A des 605.0	cription of occurrence that in 1707, Florida Statutes, (copy	resulted in the limited 605.0707 on back cov	liability company's dissi er letter).	olution pursuant to sc	ction
					_
					_
			 		2023
	re are no members, enter the	name and address of	the person appointed to		is 25 2
				;	-
	<u></u>		: !	. 1	<u>ა</u> ა ნ
	_				
6. Signa above to	ture of an authorized persor wind up the company's act	or if there are no mer	mbers, the signature of th	ne person appointed a	— nd listed
Yau	ey Zyò		NANCY 7	RIJA	
1	(/ Signature	filing fei	Printed N E: \$25.00	ame	

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.

unknown claims against this limited	liability company as p	rovided in s. 605.0712, i	F.S.
This "Notice of Limited Liability C voluntary dissolution.	ompany Dissolution'	is optional and is not re	quired when filing a
Name of Limited Liability Company	•	 ILLAN INVESTMENTS 	LLC
Document number of Limited Liabil	ity Company is: L2300	0156143	
Date of dissolution was:			
Description of information that must	be included in a writt	en claim:	
BY VOLUNTARY DECISION			
			 .
Mailing address where claims can be	sent: (Claims cannot	be sent to the Division o	f Corporations)
			····
			· · · · · · · · · · · · · · · · · · ·
			
A claim against the above named lim claim is commenced within 4 years a	ited liability company fter the filing of this n	will be barred unless a otice.	proceeding to enforce the
Printed Name of the Person File		Varian	Pos
Printed Name of the Person Fill	ing	Signature of	the Herson Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00