

7/20/24, 2:30 PM

Division of Corporations

L23000272361

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H24000226903 3)))



H240002269033ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : RC TAX SERVICE LLC
Account Number : 120140000083
Phone : (407)932-0040
Fax Number : (407)520-5473

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NAPOSAKI LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

JUL 15 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NAPOSAKI LLC

Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

ZULUAGA RAMIREZ, MAURICIO A

Name of Person

Firm/Company

11390 SW 25TH ST SUITE 310

Address

MIRAMAR, FL 33025

City/State and Zip Code

bvl@getaxservice.com

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

For further information concerning this matter, please call:

ZULUAGA RAMIREZ, MAURICIO A

407

9104738

at (_____) _____

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

FILED
2024 JUL 15 AM 4:29
TALLAHASSEE, FLORIDA

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: NAPOSAKI LLC

SECOND: The Florida Document number of the limited liability company is: L23000272361

THIRD: Document to be corrected is: VOLUNTARY DISSOLUTION

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The name of the designated person on the voluntary dissolution was wrong

The correct names of the appointed persons are: ZULUAGA RAMIREZ, MAURICIO A

QUINTERO HOYOS, NHORA M

OR

- ☒ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

The way in which the document was signed defectively was: NICOLAS GRAJALES DUQUE

and the corresponding correction are as follows:

ZULUAGA RAMIREZ, MAURICIO A - QUINTERO HOYOS, NHORA M - 11390 SW 28TH ST SUITE 310MIR.

OR

- ☒ The electronic transmission of the record was defective.

Mauricio Zuluaga
Signature of Authorized Representative

07/15/2024
Date

Signature of new registered agent, if applicable (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Mauricio Zuluaga
Registered Agent's Signature

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

FILED
Apr 25, 2024
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

NAPOSAKI LLC

The document number of the limited liability company: L23000272361

The file date of the articles of organization: June 5, 2023

The effective date of the dissolution if not effective on the date of filing: April 25, 2024

A description of occurrence that resulted in the limited liability company's dissolution:

I AM PROCEEDING WITH THE DISSOLUTION OF MY COMPANY DUE TO THE LACK OF COMMERCIAL ACTIVITY SINCE ITS OPENING AND THE SIGNIFICANT FINANCIAL LOSSES IT HAS EXPERIENCED.

The name and address of the person appointed to wind up the company's activities and affairs:

NICOLAS GRAJALES DUQUE
12584 NW 57TH PL
CORAL SPRINGS, FL 33076

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: NICOLAS GRAJALES DUQUE

Electronic Signature of authorized person