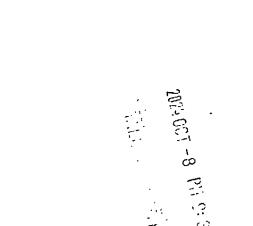
## 

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Document Number)
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## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJE	· · · · · · · · · · · · · · · · · · ·				
	(Name of Limit	ed Liability Comp	pany)		
	closed Articles of Dissolution and fee(s) are submitteeturn all correspondence concerning this matter to	_			
	YADNY VERA				
	(Nan	ne of Person)			
	(Firm/Company)  1332 SE STARKLAKE CT  (Address)  PORT SAINT LUCIE FL 34952				
	(City/Sta	te and Zip Code)			
For furt	her information concerning this matter, please call;				
	YADNY VERA	772 at (	2892112		
	(Name of Person)		Code & Daytime Telephone Number)		
Enclosed	I 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

on were filed on	and assigned
286882	
the dissolution if not effective on the date of the date cannot be prior to or more than 90 days later that block does not meet the applicable statutor ective date on the Department of State's records.	han date document is received for filing) y filing requirements, this date will not b
te that resulted in the limited liability compa (copy 605.0707 on back cover letter).	ny's dissolution pursuant to section
ZER ABLE TO START OPERATING	
ER ABLE TO START OPERATING	
ER ABLE TO START OPERATING	
nter the name and address of the person app	ointed to wind up the company's
YADNY VERA	
1332 SWE STARLAKE CT	
PORT SAINT LUCIE FL 34952	70
	77. 0
	the dissolution if not effective on the date of ye date cannot be prior to or more than 90 days later than this block does not meet the applicable statutor ective date on the Department of State's records. The second of the limited liability comparation (copy 605.0707 on back cover letter). The ABLE TO START OPERATING  ER ABLE TO START OPERATING  ER ABLE TO START OPERATING  The second of the person appears of the p

Printed Name