

P19000015393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

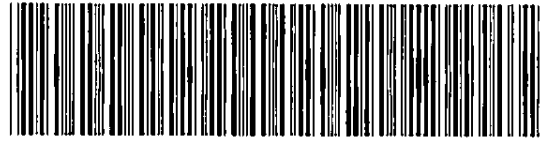
(Document Number)

Certified Copies _____ Certificates of Status _____

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12/30/24--01003--005 **25.00

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2024 DEC 30 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Aloha Hawaiian Grill Inc.
(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:

Jiancheng Lin
(Name of Person)

Aloha Hawaiian Grill
(Firm/Company)

3932 Pembroke Rd
(Address)

pembroke Park, FL, 33023
(City/State and Zip Code)

For further information concerning this matter, please call:

Jiancheng Lin at (808) 280 4448
(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
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**

1. The name of a limited liability company is

Aloha Hawaiian Grill Inc

2. The Articles of Organization were filed on 09/24/19 and assigned

document number P19000075393

3. The delayed effective date the dissolution if not effective on the date of filing: 12/20/24
(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).

The company is closed down in 2020 due
to the restaurant sold to someone else.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Jiancheng Lin

4370 SW 125th W

Miramar, FL, 33027

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

[Signature]

Signature

Jiancheng Lin

Printed Name

FILING FEE: \$25.00

2024 DEC 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
AH10:12

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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.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Aloha Hawaiian Grill Inc

Document number of Limited Liability Company is: P190000 75393

Date of dissolution was: 12/16/2024

Description of information that must be included in a written claim:

This company closed down about 4 yrs ago.
I (Jiancheng Lin) forgot to close this corporation

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

4390 SW 125th LN
Miramar, FL, 33027

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Ju Lin

Printed Name of the Person Filing

Signature of the Person Filing

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA