

P99000039005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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APR 7 2020

2020 APR -7 PM 3:05

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APR 20 2020

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LLORIAN INVESTMENTS, INC

DOCUMENT NUMBER: P99000038005

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GABRIEL RAMOS MBA

(Name of Contact Person)
RAMOS, RAMOS & COMPANY

(Firm/Company)
8798 SW 8TH STREET, SUITE 6

(Address)
MIAMI, FL 33174

(City/State and Zip Code)

For further information concerning this matter, please call:

GABRIEL RAMOS MBA

(Name of Contact Person) at ((305) 220-2127)
(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

LLORIAN INVESTMENTS, INC.

SECOND: The document number of the corporation (if known): P99000038005

THIRD: The date dissolution was authorized: DECEMBER 31, 2019

Effective date of dissolution if applicable: MARCH 19, 2020

(no more than 90 days after dissolution file date)

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.

FOURTH: Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

Signature: _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - or in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

MANUEL MARTINEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: LLORIAN INVESTMENTS, INC.

The above named corporation is the subject of dissolution and the effective date of a dissolution is: 03/19/2020

(date filed with the Dept. of date specified in the Articles of Dissolution)

Description of information that must be included in a claim:

All claims against the assets of the Corporation must be made in writing and must include the claim amount, origination, date and copy of document supporting claim. The deadline for submitting claims is 120 day from the date "Articles of Dissolution" are filed ("Claim Date"). All claims not received by the "Claim date" will not be recognized.

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

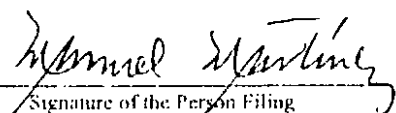
1025 Castile Avenue

Coral Gables, FL 33134

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

Manuel Martinez

Printed Name of the Person Filing


Signature of the Person Filing