

LO50000 35632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

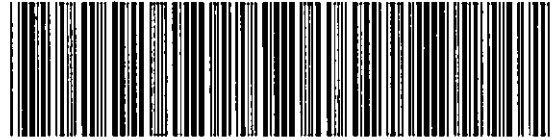
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 14 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LaMaison Properties, LLC

Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

MICHAEL M. WALLACK, ESQ.

Name of Person
WALLACK LAW FIRM

Firm/Company
3260 FRUITVILLE ROAD, SUITE A

Address
SARASOTA, FL 34237

City/State and Zip Code

MMW@WallackLawFL.com

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

For further information concerning this matter, please call:

MICHAEL M. WALLACK, ESQ. at (941) 954-1260

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

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

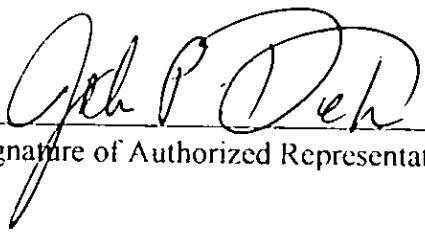
FIRST: The name of the limited liability company is: LaMaison Properties, LLC

SECOND: The Florida Document number of the limited liability company is: LO5000035632

THIRD: The date of filing of the initial articles of organization is: APRIL 05, 2012

FOURTH: The date of filing of the dissolution is: April 15, 2020

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.



Signature of Authorized Representative

JOHN P. DUKOVAC, Manager

Typed or printed name of signature

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

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