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(Requestor's Name)	_				
(Address)	_				
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(City/State/Zip/Phone #)	_				
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status	_				
Special Instructions to Filing Officer:	\neg				
Special instructions to 1 lining offices.					

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COVER LETTER

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TO:	Division of Corporations								
	LAGLER, LLC								
SUBJ	(Name of Limited Liability Company)								
		ticles of Dissolution and fee(s) are submitted	-						
		Deborah	R. Mayo, Esq.						
(Name of Person)									
South Florida Corporate Counsel									
(Firm/Company)									
7249 SW 53rd Avenue									
	•	(A	ldress)						
	Miami, FL 33143								
(City/State and Zip Code)									
For fu	rther inforr	mation concerning this matter, please call:							
		Deborah R. Mayo	305 343-0597						
		(Nume of Person)	at () (Area Code & Daytime Telephone Number)						
Enclose	ed is a checl	k for the following amount:							
	≘ \$ 25,00 F	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		ration Section on of Corporations lox 6327	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 liabil	ity company is			
NEXTGEN - FLAGLER, LLC	· ·			
2. The Articles of Organization		06	and assigned	2920 HOV 24
document number L0600001	6848			121
3. The delayed effective date t (effective date cannot be prior to o in this block does not meet the effective date on the Department	r more than 90 days later tha applicable statutory filing	n date document is recei	ved for filing) Note: If the date	. 골 e in sco ed
4. A description of occurrence 605.0707, Florida Statutes, (•	y's dissolution pursuant to	section
The consent of the sole mem	· ·	•	issolution, and to the	
winding up of the limited lia	ibility company's affairs	3.		
5. If there are no members, entactivities and affairs:	er the name and address	s of the person appoi	nted to wind up the compa	ny's
6. Signature of an authorized pabove to wind up the company	person or if there are no	members, the signat	ure of the person appointed	l and liste
likh		Wilbur S. Logan, A		
Signature		P	rinted Name	

FILING FEE: \$25.00

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.

Wilbur S. Logan, Authorized Person

Printed Name of the Person Filing

claim is commenced within 4 years after the filing of this notice.

Signature of the Person Filing

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

A claim against the above named limited liability company will be barred unless a proceeding to enforce the