L11000063383

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	(f)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to Filing Officer:		

Office Use Only



500261025045

06/13/14--01015--005 **25.00

JUN 1 7 2014

T. BROWN

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: D'ISSOLVE LLC (Name of Limited Lie	ability Company)
The enclosed Articles of Dissolution and fee(s) are submitted for Please return all correspondence concerning this matter to the form	-
Kar. Tew (Name of I	
	Person) Lakes LLC npany)
	Run Rd
Callahan, FL (City/State and	32011 1 Zip Code)
For further information concerning this matter, please call:	
(Name of Person)	at (904) Z37-8894 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$25.00 Filing Fee and Certificate of Dissolution	555.00 Filing Fee, Certificate of Dissolution &
	Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY The name of a limited liability company is 7627 Indian Lakes LLC
	FOR A LIMITED LIABILITY COMPANY
TI	ne name of a limited liability company is
1.	7627 Indian Lakes LLC
T	ne Articles of Organization were filed on $\frac{5/31/2011}{}$ and assigned
do	ocument number LN0000 63383
Tl	ne delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing)
. A 60	description of occurrence that resulted in the limited liability company's dissolution pursuant to section 5.0707, Florida Statutes, (copy 605.0707 on back cover letter).
_	Sold rental property that this LLC
	was used for.
If	there are no members, enter the name and address of the person appointed to wind up the company's
ac	tivities and affairs:
. Si stec	gnature of an authorized person or if there are no members, the signature of the person appointed and above to wind up the company's activities and affairs:
	Kou R. L. Kari Ten
	Signature Kari Tew Printed Name

FILING FEE: \$25.00