

L11000/33492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

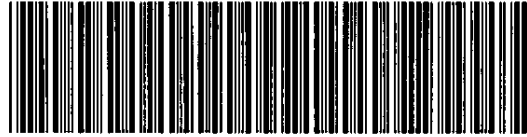
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OCT 27 2016

A. LUNT

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10/20/14--01010--007 **25.00

STATE OF CALIFORNIA
DEPARTMENT OF REVENUE

2014 OCT 20 PM 2:39

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 625 Lakewoode LLC
(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:

David Saunders
(Name of Person)
Krasnow Saunders Kaplan & Beninati
(Firm/Company)
500 N Dearborn, 2nd Fl.,
(Address)
Chicago, IL 60654
(City/State and Zip Code)

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2014 OCT 20 PM 3:39
TALLAHASSEE, FL

For further information concerning this matter, please call:

David Saunders at 312 755-5700
(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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
625 Lakewoode LLC

2. The Articles of Organization were filed on 11/23/2011 and assigned
document number L11000133492

3. The delayed effective date the dissolution if not effective on the date of filing: November 1, 2014
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

Consent of all of the members

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

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

Sheila Goode
Printed Name

FILING FEE: \$25.00

FILED
2011 OCT 20 PM 3:39

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: 625 Lakewood LLC

Document number of Limited Liability Company is: L11000133492

Date of dissolution was: November 1, 2014

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

2014 OCT 20 PM 2:39

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

C/O David Saunders

Krasnow Saunders Kaplan & Beninati

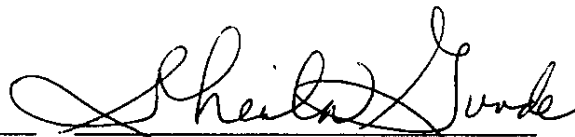
500 N. Dearborn, 2nd Floor

Chicago, IL 60654

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.

Sheila Goode

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