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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

SUBJECT: Pellagic 709 Properties, 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:					
, leave total an eorespondence concerning the maner to the total ving.					
Visal Landona					
Vinh Leng (Name of Person)					
<b>(</b>					
(Firm/Company)					
11550 Plano Rd Suite 100					
(Address)					
Dallas Tx 75243					
Dallas Tx 75243 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Vint LeiDang at 972, 523-9186					
(Name of Person) (Area Code & Daytime Telephone Number)					
Fordered in a short Courte Cillerian arrange					
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: STREET/COURIED ADDRESS:					

Registration Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabil Pellagic	lity company is 709 Prope	inties, L	ر		
2. The Articles of Organizatio	-71.	26/2013	and assign	ned	
document number	3000 1066 11	b			
3. The delayed effective date t (effective Note: If the date inserted in t listed as the document's effective	this block does not meet the	applicable statutory t	n date document is re-	2016 ceived for filing) this date will not	: be
4. A description of occurrence 605.0707, Florida Statutes, (  entity crea	that resulted in the limit (copy 605.0707 on back c	over letter).		irsuant to sectic	n
·					
5. If there are no members, en activities and affairs:	ter the name and address	of the person appoi	nted to wind up t	he company's	בר ה ה
	11550 Pla	no Rd,	Suite 10	TO A	
	Dallas, To	1 75243		H 9: 15 F STATE FLORIDA	
6. Signature of an authorized plisted above to wind up the cor	person or if there are no n npany's activities and aff	nembers, the signat	ure of the person	appointed and	
Charles Signature		U	rinted Name	)ano,	

FILING FEE: \$25.00