

L14000094426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

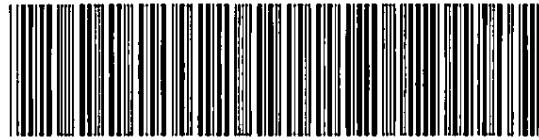
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300420344443

TALLAHASSEE, FLORIDA

2023 DEC 14 PM 12:19

FILED

TALLAHASSEE, FLORIDA

2023 DEC 14 AM 11:18

RECEIVED



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations  
From: Alexxis Weiland-Sorenson  
Ext: 61592  
Date: 12/14/23  
Order #: 1334620-2  
Re: 410 Lake Osborne Drive LLC  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed-please find:

Application for Dissolution/Cancellation/Termination  
Amount to be deducted from our State Account: \$25.00 - FL State Account Number:  
120000000195

AUTH:

A handwritten signature in black ink, appearing to read 'Alexxis Weiland-Sorenson', is written over the 'AUTH:' label.

Please take the following action:

File in your office on basis  
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 410 Lake Osborne Drive 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:

Charlotte Ghigliazza

\_\_\_\_\_  
(Name of Person)

Brick & Patel LLP

\_\_\_\_\_  
(Firm/Company)

600 Fifth Avenue, 14th Floor

\_\_\_\_\_  
(Address)

New York, NY 10020

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Charlotte Ghigliazza

\_\_\_\_\_  
(Name of Person)

212

at (\_\_\_\_\_) \_\_\_\_\_

(Area Code & Daytime Telephone Number)

554-5292

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

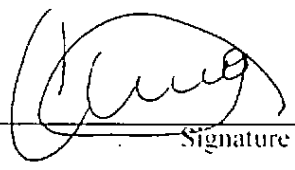
**Street Address:**

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**

**FILED**  
**2023 DEC 14 PM 12:19**  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
410 Lake Osborne Drive LLC
  
2. The Articles of Organization were filed on June 11, 2014 and assigned  
document number L14000094426
  
3. The 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)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
  
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).  
Upon the occurrence of the event described in s. 605.0701(1), pursuant to the provisions of the  
operating agreement the dissolution was directed at the written consent of the managing director.  
\_\_\_\_\_  
\_\_\_\_\_
  
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

Charlotte Ghigliazza  
Printed Name

**FILING FEE: \$25.00**