11000112621

| (Requestor's Name) | | | |
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| (Address) | | | |
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| (11) | | | |
| (Address) | | | |
| | | | |
| (City/State/Zip/Phone #) | | | |
| <u> </u> | | | |
| PICK-UP WAIT MAIL | | | |
| | | | |
| (Business Entity Name) | | | |
| (Submoss Enally Name) | | | |
| | | | |
| (Document Number) | | | |
| | | | |
| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|--|
| SUBJECT: EL NIDO HOMES GROU | P LLC |
| | mited Liability Company) |
| | |
| The enclosed Articles of Dissolution and fee(s) are sub | |
| Please return all correspondence concerning this matter | to the following: |
| Angelo Famiglietti | |
| 1) | Name of Person) |
| EL NIDO HOMES GRO | _ |
| | Firm/Company) |
| 17633 Gunn Hwy #181 | (Address) |
| Odosoo El 22556 | (Additions) |
| Odessa, FL 33556 | (State and Zip Code) |
| | |
| For further information concerning this matter, please c | all: |
| Angelo Famiglietti | at (_727) 254-2571 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: | |
| \$25.00 Filing Fee 30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Sectificate of Status & Certified Copy (additional copy is enclosed) \$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) |
| MAILING ADDRESS: | STREET/COURIER ADDRESS: 5 |
| Registration Section Division of Corporations | Registration Section Division of Corporations |
| P.O. Box 6327 | Clifton Building |
| Tallahassee, FL 32314 | 2661 Executive Center Circle R R Tallahassee, FL 32301 |

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liability company is EL NIDO HOMES GROUP LLC | | |
|--|---|---------------------------------------|
| 2. The Articles of Organization were filed on 10 L11000112621 | 0/03/2011 | and assigned document numb |
| 3. The date the dissolution was approved: 01/2 | 25/2012 | · |
| 4. A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on ba Written consent of all of the mea | e limited liability company ack cover letter). | |
| | | |
| 5. CHECK ONE: | | |
| All debts, obligations and liabilities of OR- Adequate provision has been made for 6. All remaining property and assets have been d | r the debts, obligations and | liabilities pursuant to s. 608.4421. |
| rights and interests. 7. CHECK ONE: | | |
| There are no suits pending against the -OR-Adequate provision has been made for entered against it in any pending suit. | | gment, order or decree which may b |
| ignatures of the members having the same percenta | nge of membership interests | s necessary to approve the dissolutio |
| Signature | Rubim | Printed Name |
| | Angelo | Famiglietti SSEE OF THE |
| | | PM 2: SZ |
| | | |

FILING FEE: \$25.00