

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MICHAEL J. FREEMAN, P.A.

Account Number : 072720808142 Phone : (305)442-1567 Fax Number : (305)442-1227

LLC DISSOLUTION OR WITHDRAWAL SEABREEZE COURT 270 LLC

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

T. The name of a limited liability company SEABREEZE COURT 270 LLC	is .
2. The Articles of Organization were filed	on July 28, 2015 and assigned
document number L15000128017	
3. The delayed effective date the dissolution (effective date cannot be Note: If the date inserted in this block does listed as the document's effective date on the	more to or more than 90 days later than date document is received for filing)
 A description of occurrence that resulted 605.0707, Florida Statutes, (copy 605.070 	in the limited liability company's dissolution pursuant to section of on back cover letter).
Pursuant to the occurrence of an event describ	bed in s. 605.0701(1)-(3), the LLC shall deliver for filing articles of
	issolution of the LLC was approved by its sole member and its
activities and affairs must be wound up.	OGG BR
	nd address of the person appointed to wind up the company
activities and affairs:	27 8
	
Signature of an authorized person or if the sted above to wind up the company's activi	ere are no members, the signature of the person appointed and ties and affairs:
han an	
JUNC HOlmm	Patrick Peterman, Mannger
Signature	Printed Name

FILING FEE: \$25.00

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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.

Document number of Limited Liability Company is: L15000128017	
Date of dissolution was:	
Description of information that must be included in a written claim:	
NAME AND ADDRESS OF CLAIMANT, DECRIPTION OF CLAIM AND AMOUNT OF CLAIM	
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二 二 2	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
153 SEVILLA AVENUE	
153 SEVILLA AVENUE CORAL GABLES, FL 33134	
	
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Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

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