

(Requestor's Name)				
(Ad	ldress)			
(Address)				
(Cit	ty/State/Zip/Phone	<u>.</u> ≥#)		
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PICK-UP	☐ WAIT	MAIL		
,				
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
	_			
Special Instructions to	Filing Officer:			
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Office Use Only



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SECRETARY OF STATE

OCT 2 3 2014 T. HAMPTON

COVER LETTER

SUBJECT:	T: 128th Street Associates, LLC				
	(Name of Limite	ed Liability Company)			
The enclosed /	Articles of Dissolution and fee(s) are submitt	ted for filing.			
Please return a	Il correspondence concerning this matter to	the following:			
	Madelyn Ocasio				
	(Name of Person)				
	128th Street Associates, LLC				
(Firm/Company)					
	1601 Washington Avenue, Suite 800				
	(Address)				
	Miami Beach, FL 33139				
	(City/Sta	ate and Zip Code)			
For further info	ormation concerning this matter, please call:				
Mad	elyn Ocasio	305 695-5705 at ()			
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a ch	eck 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

TO:

Registration Section Division of Corporations

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability co	ompany is				
128th Street Associates, LLC					
The Articles of Organization wer document number L00000001020		and assigned			
. 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)					
4. A description of occurrence that 605.0707, Florida Statutes, (copy The limited liability company ceases	605.0707 on back cover letter).	ompany's dissolution pursuant to section			
business.					
If there are no members, enter the activities and affairs:	e name and address of the perso	n appointed to wind up the company's			
6. Signature of an authorized person listed above to wind up the company	y's activities and affairs: LNR REFSG	signature of the person appointed and Holdings, LLC, by Leisure Colony LLC, its sole member			
	~ · ·	Rivers, Vice President			
Signature		Printed Name			

FILING FEE: \$25.00

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