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(Red	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
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Certified Copies	_ Certificate:	s of Status
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: T

Almer Street Properties

(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:

Lawrence	Liner		
	(Name of Person)		
	(Firm/Company)		
0.51		Circle	#2
8821 GOWL	modity (Address)	Circle	
orlando	٠ - ١	32819	
	City/State and Zip Co	de)	

For further information concerning this matter, please call:

gence masterson

407

351-2500

(Area Code & Daytime Telephone Number)

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

Palmer Street Properties LLC
2. The Articles of Organization were filed on Aug 6, 2001 and assigned
document number LO 10000 13 18 1
3. The delayed effective date the dissolution if not effective on the date of filing: A C 1 15 201 (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).
sold commercial Building
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:
LAWRENCE Liner FEET TO SUSTERING Circle # 7 100 100 100 100 100 100 100 100 100 1
LAWRENCE LINEY TO THE TOTAL OF
LAWRENCE Liner FEET TO SUSTERING Circle # 7 100 100 100 100 100 100 100 100 100 1
FUSI Commodity Circle # 7 50 50 6. Signature of an authorized person or if there are no members, the signature of the person appointed and