10300003704

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SECRETARY OF STATE
ARCASSES ET ORIDA

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COVER LETTER

TO: Registration Section Division of Corporations

•			
SUBJECT:	SOHA LLC	•	
DOCUMENT NU	MBER: <u>L 020</u>	00003704	
The enclosed Notic	ce of Limited Liability (Company Dissolution	and fee are submitted for filing.
Please return all co	rrespondence concerning	g this matter to the follo	owing:
	· PETER S	ONDERS	
		Contact Person)	
	SOHA	LLC n/Company)	
	(Firn	n/Company)	
	905 MA	R <i>BLE)RIVE</i> ddress)	.
	(Ac	ddress)	
	NAPLES	FL 34104 te and Zip Code)	
	(City/Stat	te and Zip Code)	
For further informa	ation concerning this mat	ter, please call:	
PETER J	ONDERS	at (<u>239</u>) _	430 -0262
(Name o	f Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check	for the following amou	nt:	
■\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy (Additional copy is enclo	
MAILING ADDRESS:			REET ADDRESS:
Amendment Section		Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	
		Tal	lahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is			
	SOHA LLC			
2.	The Articles of Organization were filed on			
	document number <u>L02000003704</u>			
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).			
	LLC CEASES CONDUCTING BUSINESS			
	VOLUNTARY DISSOLUTION			
	·			
5.	If there are no members, enter the name and address of the person appointed to wind up the company's			
	activities and affairs: PETER SONDERS			
	905 MARBLE DRIVE			
	NAPLES, FZ 34104			
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:			
	Pefer Faulen PETER SONDERS			
	Signature Printed Name			
	FILING FEE: \$25.00			
	OF STAI			