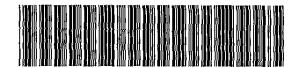
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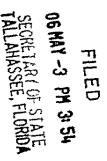
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consider Instructions to Filling Officers
Special Instructions to Filing Officer:
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Office Use Only



700073704417

05/03/06--01039--007 **60.00



		COVER LETTER	
TO:	Registration Section Division of Corporations		
SUBJE	ECT: 520 Associates, LLC	ame of Limited Liability Company)	
	closed Articles of Amendment and fed		
	Peter J.Addison		
		(Name of Person)	
	520 Associates,	LLC	
		(Firm/Company)	
	PO Box 4567		
		(Address)	
	Fort Lauderdale,	FL 33338	٠
		(City/State and Zip Code)	
For fur	ther information concerning this matte	r, please call:	
	Peter J.Addison	at (954 <u>)</u> 525-1237	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclose	d is a check for the following amount:		
□ \$25. 0	00 Filing Fee \$30.00 Filing F Certificate of		
	MAILING ADDRES Registration Section Division of Corporation P.O. Box 6327 Tallabasses, FL 32314	Registration Section	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

06 MAY -3 PM 3: 54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is			Ottion
520 Associates, LLC			- Water Committee of the Committee of th
2. The Articles of Organization were filed on $5/2$	22/2002	and assigned de	ocument number
L02000012923		· james man	
	 _		
3. The date the dissolution was approved: 12/31	1/200 <u>5</u>		. "
4. A description of occurrence that resulted in the 608.441, Florida Statutes, (copy 608.441 on ba	limited liability cor ck cover letter).	mpany's dissolution pursuan	t to section
Business Concluded	_	<u> </u>	•
			· · · · · · · · · · · · · · · · · · ·
		<u> </u>	<u></u>
		T. C. A. M. PAL	
5. CHECK ONE:	-		
All debts, obligations and liabilities of OR- Adequate provision has been made for	the debts, obligation	ns and liabilities pursuant to	s. 608.4421.
All remaining property and assets have been dirights and interests.	stributed among its	members in accordance with	their respective
7. CHECK ONE:	÷		
There are no suits pending against the	·=		
OR- Adequate provision has been made for entered against it in any pending suit.			e which may be
matures of the members having the same percentag	ge of membership in	nterests necessary to approve	the dissolution:
Signature	=	Printed Name	
11/1/11	_ Pe	ter J.Addison	_
	·· -		, · ·
	_ <u></u>		
	- , 	<u></u>	