# L03000013952

(Re	equestor's Name)			
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Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			





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### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: JACKSONVILLE 779 RE LLC

(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:

?	AUL K		•	
TACKS	(Name of)	,	R Z	LLC
	(Firm/Cor	npany)		
6420	WIN DIR	OAKS	BLI	V 12
	(Addre	ess)	_ "	n. 0
ORA	ANDO	FL	328	()
	(City/State and	Zip Code)		

For further information concerning this matter, please call:

PAUL KIANG at (457) 383 7182
(Name of Person) (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

•	ARTICLES OF DISSOLUT FOR A LIMITED LIABILITY CON	7. " 11 .	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
The name of a limited liab		LLC PACTANASSE PA	ر. ا
The Articles of Organization	on were filed on 4/17/	2013 and assigned	IDA
	03000013952		
The delayed effective date (effective	the dissolution if not effective on the e date cannot be prior to or more than 90 days	date of filing:	
If there are no members, er activities and affairs:	iter the name and address of the perso	n appointed to wind up the company's	
	PAUL KIAN	G .	
	6420 WINDER 6	DAKS BLVD	
	OPERNOO, FL	32819	
Signature of an authorized sted above to wind up the co		signature of the person appointed and	
Dal. Lie		PAUL KIANG	
Signature		Printed Name	

**FILING FEE: \$25.00**