10400022288

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(Cit	y/State/Zip/Phone	e #)
PIÇK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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DIVISION OF CERPONATIONS

K SALY JAN 24 2018

COVER_LETTER

Division of Corporations
SUBJECT: EMERAID GULS Properties, LIC (Name of Limited Liability Company)
(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:
MATHE GREU
(Name of Person)
(Firm/Company)

H307 Jones Bridge Circle
(Address)

Norcross, GA 30092
(City/State and Zip Code)

For further information concerning this matter, please call:

mation concerning this matter, please call:

HUH 433 - 4081

MAT GIEM

(Name of Person)

at (770) 739-8728

(Area Code & Daytime Telephone Number)

WATNUSAC YAhoo. Com

Enclosed is a check for the following amount:

TO:

Registration Section

\$25.00 Filing Fee and Certificate of Dissolution

□ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

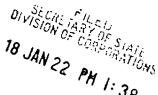
MAILING ADDRESS:

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.



1. The name o	of a limited liabili	ty company is			1: NA 25
	EMERALT) Gulf	Properties	5,40	
2. The Articles	s of Organization	were filed on	3/23/04	and assign	e d
document n	umber <u>LO</u>	40000 22	RS\$,
Hote: If the	e date inserted in ti	ns block does not med	effective on the date of or more than 90 days later than et the applicable statutory fument of State's records.	filing:	eived for filing) this date will not be
605.0707, FI	lorida Statutes, (o Sp. Marty 6211 =	copy 605.0707 on b 62/1 Su 54/1 St	USET AVE	L. WIGE	5 50KL.
5. If there are activities an		er the name and add	tress of the person appoi	nted to wind up th	ne company's
 Signature o listed above to 	f an authorized p wind up the corr	erson or if there are	no members, the signated affairs:	ure of the person a	appointed and
MJ	July Signature		MATHE	w (a)	RELL

FILING FEE: \$25.00