## 104000043488

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Sasinosa Eliki, Hallio)				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				

Office Use Only



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#### **COVER LETTER**

то:	Registration Section Division of Corporations	2023 DEC DEVISION TALLA	17
SUBJE	CCT: SILVER DON LLC (Name of Limited Liability Company)	C-4 PM	
The en	closed Articles of Dissolution and fee(s) are submitted for filing.	DRIDS	

Please return all correspondence concerning this matter to the following:

MARK Silverstein
(Name of Person)
NA
(Firm/Company)
10427 Greenhedges DR
(Address)
TAMPA, FL 33626
(City/State and Zip Code)

For further information concerning this matter, please call:

MAIZK S. LVERStein at (813) 679-7488

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$\$ \$25.00 Filing Fee and Certificate of Dissolution

Section 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

A LIMITED EIABIEITT COMI ANT	<u>:-</u> -	2	
1. The name of a limited liability company is  SiLVER DON LLC	SYNY TIVE	023 DEC - ↓	<b>T</b>
2. The Articles of Organization were filed on 06/09/2004 and assign document number 40400043488	II OF STATE ORPORATION FF. MLDVID:	PM 1: 11	I
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 re  Note: If the date inserted in this block does not meet the applicable statutory filing requirements. listed as the document's effective date on the Department of State's records.			: be
4. A description of occurrence that resulted in the limited liability company's dissolution put 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  I sold the building that was placed in the Silvered on LLC  May of Zoza.	rsuant to	section	1
5. If there are no members, enter the name and address of the person appointed to wind up the activities and affairs:  MA12 K 5 i LV2125 tail  10427 6 Reenhedges  TAMPA, FL 33626	ne compa	any's	
6. Signature of an authorized person or if there are no members, the signature of the person a above to wind up the company's activities and affairs:  MA12K 5: We Signature  Printed Name			
Signature Frince Name			

FILING FEE: \$25.00

#### Notice of Limited Liability Company Dissolution

# 23 DEC -1 PAGE 1

#### **NOTE:** This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when fining a # voluntary dissolution.

Name of Limited Liability Company: 51 VCR DON LLC

Document number of Limited Liability Company is: L04000043488

Date of dissolution was:  $\frac{2}{2}$ 

Description of information that must be included in a written claim:

I Sold the building that was placed in the Silver DON CLL Mame in May of 2023. There is No Reason to keep this LLC Active.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

MARK SiLVerstein 10427 Greenhadges DR. THMPH, FL 33626

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

MARK SILVERSTAIN

Printed Name of the Person Filing

Signature of the Person Filing