

LO 4000059401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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12/12/16--01019--017 **55.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA

DEC 13 2016

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Prime at North Carolina II, 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:

Margarita Galiana

(Name of Person)

Lomar Group, LLC

(Firm/Company)

5775 Blue Lagoon Dr., Suite 350

(Address)

Miami, FL 33126

(City/State and Zip Code)

For further information concerning this matter, please call:

Jose Menendez

(Name of Person)

at (305) 267-9660

(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**

1. The name of a limited liability company is

American Prime at North Carolina II, LLC

2. The Articles of Organization were filed on 8/10/2004 and assigned

document number L04000059401

3. The delayed effective date the dissolution is not effective on the date of filing: 12/15/2016

(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).

Fulfillment of business purpose.

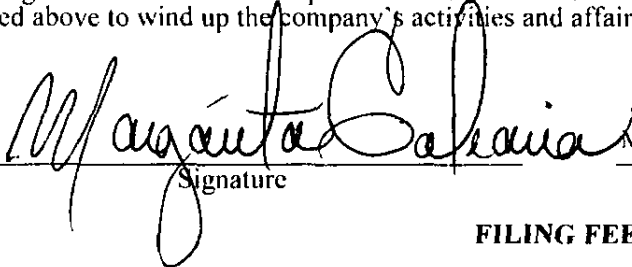
5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs:

Lomar Group, LLC, Sole Member

5775 Blue Lagoon Drive, Suite 350

Miami, FL 33126

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Signature

Margarita Galiana

Printed Name

FILING FEE: \$25.00

FILED
16 DEC 12 PM 12:11
CLERK OF STATE
TALLAHASSEE, FLORIDA

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment 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 filing a voluntary dissolution.

Name of Limited Liability Company: American Prime at North Carolina II, LLC

Document number of Limited Liability Company is: L04000059401

Date of dissolution was: 12/15/16

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

Name of claimant

Address and telephone number of claimant

Description of the nature and amount of the claim

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

Lomar Group, LLC

c/o Margarita Galiana

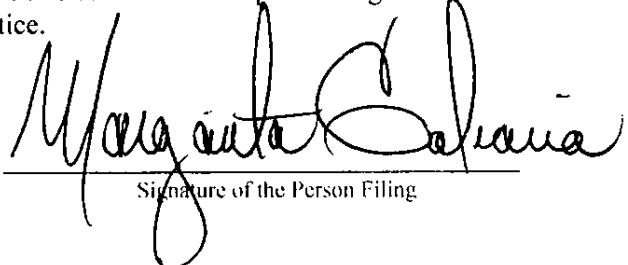
5775 Blue Lagoon Dr., Suite 350

Miami, FL 33126

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.

Margarita Galiana

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

16 DEC 12 PM 12:11
LED
DIVISION OF STATE
CORPORATIONS
FLORIDA