

L04 0000 68612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

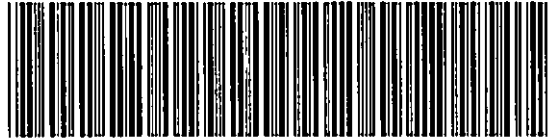
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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MAY 09 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **509 Isle of Capri LLC**
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Phillips

(Name of Person)

Keller and Associates CPA

(Firm/Company)

PO Box 1403

(Address)

Vail, CO 81658

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Phillips

(Name of Person)

at (**970**) **476-1692**

(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

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CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

509 Isle of Capri, LLC

2. The Articles of Organization were filed on Sep 20th, 2004 and assigned

document number L04000068612

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 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).

Singe asset of 509 Isle of Capri was sold.

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

activities and affairs:

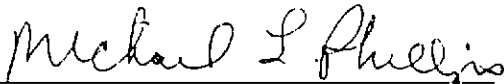
Michael Phillips

Keller and Associates, CPA

PO Box 1403

Vail, CO 81658

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

MICHAEL L. PHILLIPS

Printed Name

FILING FEE: \$25.00

APPROVED
AND
FILED

2019 APR 29 PM 4:03

SECRETARY OF STATE
CORPORATE SERVICES DIVISION