# L04000072H87

(Re	questor's Name)	
(Ad	dress)	
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(Do	cument Number)	1
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B. BOSTICK
MAR 2 7 2014
EXAMINER

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

The Mile at Coral Way, 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:

## Vivian D Alvarez, CPA

(Name of Person

Alvarez & associates, CPAs, PA

(Firm/Company)

2601 S. Bayshore Drive, Suite 200

(Address)

Coconut Grove, FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

Vivian D. Alvarez

305

250-5660

(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

1.	The name of a limited liability company is  The Mile at Coral Way, LLC		
2.	The Articles of Organization were filed on document number L0400072487		
3.	The delayed effective date the dissolution if not effective on the date of filing:		
4.	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). Buisness purpose has been fulfilled and no longer required.		
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:		
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:  Signature  Printed Name  Simon A. Groll		
	FILING FEE: \$25.00		