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TRANSMITTAL LETTER

Division of Corporations	D 4#	
SUBJECT: Longfellow 45 Hochne LLC (Name of Limited Liability Company)	Document LO40000	
The enclosed Articles of Dissolution and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Ralph Hoehne		
(Name of Person)		
(Firm/Company)		
(Tim/Company)		
602 42 nd St Circle EAST (Address)		
Bradenton, Florida 34203		
(Oxyrodia dia oxyrosac)		
For further information concerning this matter, please call:	OS ALL	
Pula Had		
(Name of Person) at (491) Solution (Area Code & Daytim	e Telephone Number)	
Enclosed is a check for the following amount:	2:56 2:56	
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy	
(, ,	(additional copy is enclosed)	

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is	
Longfellow 45	- HOEHNE LLC
2. The date the dissolution was approved:	r 12/05
3. A description of the occurrence that resulted in section 608.441, Florida Statutes, (copy of 608	the limited liability company's dissolution pursuant to 3.441 on back of cover letter).
UC was set up in	Error
LLC is not needed.	
 CHECK ONE: All debts, obligations and liabilities of the limi -OR- 	ted liability company have been paid or discharged.
	ts, obligations and liabilities pursuant to s. 608.4421
All remaining property and assets have been di respective rights and interests.	istributed among its members in accordance with their
6. CHECK ONE: There are no suits pending against the company-OR-	y in any court.
	sfaction of any judgment, order or decree which may
Signatures of the members having the same perothe dissolution:	centage of membership interests necessary to approve
Signature	Typed or Printed name
- Hour	PACPH HOEANG
Work	JOANNE HOEHNE