L04000093955

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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 927253 7149687

AUTHORIZATION

COST LIMIT : 25.00 NO.

ORDER DATE: December 23, 2015

ORDER TIME : 4:0 PM

ORDER NO. : 927253-135

CUSTOMER NO: 7149687

DOMESTIC FILINGS

NAME: FOREST CITY WIREGRASS, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER'S INITIALS:

COVER LETTER

TO:

ŀ

Registration Section Division of Corporations

SUBJECT:

Forest City Wiregrass, 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:

Jennifer Victor	
(Name of Person)	
Forest City Enterprises	
(Firm/Company)	
50 Public Square, Suite 1360	
(Address)	
Cleveland, Ohio 44113	

(City/State and Zip Code)

For further information concerning this matter, please call:

Jennifer Victor

,,,216 ...

621-6060

(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

FILED

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

1.	. The name of a limited liability company is	6 Fisher 2011 (19 see
	Forest City Wiregrass, LLC	
2.	. The Articles of Organization were filed on December	28, 2004 and assigned
	document number L04000093955	
3.	(checave date cannot be prior to or more	tive on the date of filing: December 31, 201 than 90 days later than date document is received for filing) applicable statutory filing requirements, this date will not be of State's records.
4.	. A description of occurrence that resulted in the limite 605.0707, Florida Statutes, (copy 605.0707 on back of	d liability company's dissolution pursuant to section over letter).
	The company is being dissolved upon the occurrence of the	consent of all the members of the company.
		_
5.	If there are no members, enter the name and address of activities and affairs:	of the person appointed to wind up the company's
5. lis	Signature of an authorized person or if there are no me sted above to wind up the company's activities and affa	embers, the signature of the person appointed and airs:
	Jennju Victor	Jennifer Victor - Authorized Person
/	// Signature	Printed Name

FILING FEE: \$25.00