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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: STUART MILLER PROPERTIES 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:
STUART MILLER (Name of Person) STUART MILLER PROPERTIES LLC (Firm/Company)
500 NEWELL AILL RD # 109-C
LEESBURG F1 34748 (City/State and Zip Code)
For further information concerning this matter, please call:
Name of Person) at (352) 343-2077 (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 co	mpany is	_				
STUART MIL	LER	PROP	ERTIES	LLC		
2. The Articles of Organization wer						
document number 20-	1997	903	L05000	031673	}	
3. The delayed effective date the dis	ssolution if annot be prior	not effective to or more than	on the date of filing: 90 days later than date do	APRIL 5	30/14 ortiling)	
4. A description of occurrence that 605.0707, Florida Statutes, (copy					t to section	l
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				- L O X	SIAI I : 1	1
5. If there are no members, enter the	name and	address of th	e person appointed to	wind up the con	∄}ii ∄ ≽ nnany's	
activities and affairs:			HILLER	y wind up the con	iipaiiy 3	
			UELL A	INL Ri	#10	9-6
<u></u>	LEE	SBUI	es FL	- 342	48	
				,		
6. Signature of an authorized persor listed above to wind up the company	or if there	are no members and affairs:	pers, the signature of	the person appoir	nted and	
			.	14	D	
Steart miller		_	STVART	MILLE	EK	
Signature			Printed 1	Name		

FILING FEE: \$25.00