

105000052209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

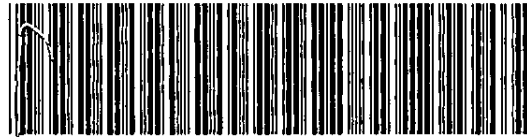
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2013 SEP 20 PM 4:41  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

08/23/13--01017--011 \*\*35.00

SEP 23 2013

D. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 5, 2013

HEATHER LOWE  
474 EAST 26TH ST  
BROOKLYN, NY 11226

SUBJECT: 2417 NORTH W 55TH TERRACE REALTY LLC  
Ref. Number: L05000052209

We have received your document for 2417 NORTH W 55TH TERRACE REALTY LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 313A00020950

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TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 2417 NW 55<sup>th</sup> Terrace Reality 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:

Heather Lowe  
(Name of Person)

2417 NW 55<sup>th</sup> Terrace Reality LLC  
(Firm/Company)

474 E 26<sup>th</sup> Street  
(Address)

Brooklyn FL 32206  
(City/State and Zip Code)

For further information concerning this matter, please call:

Heather Lowe at (917) 306-1773  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

p \$25.00 Filing Fee

p \$30.00 Filing Fee &  
Certificate of Status

p \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

p \$60.00 Filing Fee,  
Certificate of Status &  
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

CLERK OF STATE  
TALLAHASSEE, FLORIDA

2009 SEP 20 PM 4:41

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

1. The name of a limited liability company is

2417 North W 55th Terrace Reality LLC

2. The Articles of Organization were filed on 5/25/2005 and assigned document number

LO 5000052209

3. The date the dissolution was approved: 11/1/2012

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

Business closed

**5. CHECK ONE:**

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

**7. CHECK ONE:**

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

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Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Heather Lowe

Printed Name

Heather Lowe