

L050000 82887

(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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2014 MAR -6 AM 11:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR - 7 2013

T. HAMPTON



## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 700, 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:

Edwin C. Elwell

(Name of Person)

(Firm/Company)

1104 NW 1 STREET

(Address)

FT LAUDERDALE FL 33311

(City/State and Zip Code)

For further information concerning this matter, please call:

Edwin C. Elwell

(Name of Person)

954

at ( )

4632563

(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

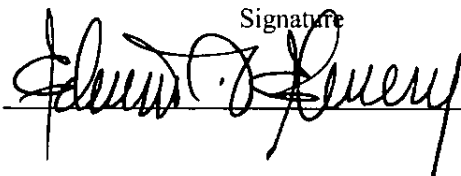
### STREET/COURIER ADDRESS:

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  
700, LLC
2. The Articles of Organization were filed on 08/22/2005 and assigned  
document number L05000082887
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_
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).  
Property sold  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Edwin C. Elwell  
1104 NW 1 Street, Ft Lauderdale FL 33311  
\_\_\_\_\_  
\_\_\_\_\_
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed  
above to wind up the company's activities and affairs:

Signature  


Printed Name  
Edwin C. Elwell

**FILING FEE: \$25.00**

**FILED**  
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