# 10500087352

(Re	equestor's Name)		
(Ad	ldress)		
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(Cit	ty/State/Zip/Phone	÷#)	
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SECRETARY OF STATE BALLAHASSEE, FLORIDI

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MAY 04 2016

S. YOUNG

# **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: DUNES ZONE T LLC (Name of Limited Liability Company)	_	
(Name of Extince Elability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
DONALD ZONE (Name of Person)		
(Name of Person)	. =	
N/A (Firm/Company)	16 MAY -2 PH	
	7	
3555 TANAGER TRIVE	2 P	
3555 TANAGER DRIVE  (Address)  ERIE, PA 16506	H 3: 37	
(City/State and Zip Code)	1	
For further information concerning this matter, please call:		
Name of Person)  at (8/4') 397-5647  (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  DUNCS ZONE I, LLC		
2.	The Articles of Organization were filed on $9-1-2605$ and assigned		
	document number <u>L057060087352</u>		
3.	The delayed effective date the dissolution if not effective on the date of filing:  (effective date cannot be prior to or more than 90 days later than date document is received for filing)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not listed as the document's effective date on the Department of State's records.  (US 2 DATE OF FILIM)	t be	i
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to sectio 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	西西	SECRE
	Dispusition OF ASSETS.)	1	AS
	CONSENT OF ALL MEMBERS	2 PM 3:	SEE, FL
		37	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:		
	•		
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:		
	Jaula Rome DOWND DEON	e_	
	Mary Struck FILING FEE: \$25.00 DONNO D. ZONO Printed Name Mary Lou Zone		
/	Mary Struck Soll FILING FEE: \$25.00 MARY LOU ZONE		TTROS