LOS000118409

(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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02/05/08--01007--016 **25.00

2000 FEB 18 PN 4: 12
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

T. CLINE

FEB 19 2008

EXAMINER

LOS-118409

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 6, 2008

RAMON RAMOS 19915 TAMIAMI AVE TAMPA, FL 33647

SUBJECT: TROPICAL ISLE INVESTMENTS LLC

Ref. Number: L05000118409

We have received your document for TROPICAL ISLE INVESTMENTS LLC and your check(s) totaling \$25.00. 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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 008A00007838

2000 FEB 18 PK 4: 12

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Tropical also uncentrated LLC (Name of Foreign Limited Liability Company)		
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Ramon Ramos (Name of Person)		
Tropical Isle INVESTMENTS LLC (Firm/Company)	2000 FEB 18 SECRETARY TALLAHASSE	
19915 TAMIAM, AUE (Address) TAMPA FC 33647 (City/State and Zip Code)		
For further information concerning this matter, please call:	DOUFEB 18 PM 4: 12 SECRETARY OF STATE ALLAHASSEE, FLORIDA	· ·
RAMON RAMON at (813) 957-6404 (Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
\$25 Filing Fee \$30 Filing Fee & \$55 Filing Fee & \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

4 1 2 3

1. The name of a limited liability company is	.
TROPICAL FSLE INU	ESTMENTS LLC
2. The Articles of Organization were filed on Aug 30 LD5000118409.	and assigned document number
3. The date the dissolution was approved: 1 Jan 87	<u> </u>
4. A description of occurrence that resulted in the limited liabilit 608.441, Florida Statutes, (copy 608.441 on back cover letter) Could not help must	ty company's dissolution pursuant to section).
	7A. 20
5. CHECK ONE:	B 18 TARY TASSE
All debts, obligations and liabilities of the limited lia one of the limited lia Adequate provision has been made for the debts, obligations.	
All remaining property and assets have been distributed amore rights and interests.	ng its members in accordance with their respective
7. CHECK ONE: There are no suits pending against the company in an OR- Adequate provision has been made for the satisfactio entered against it in any pending suit.	
Signatures of the members having the same percentage of members	ship interests necessary to approve the dissolution:
Signature	Printed Name Roman Ramos