

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

**LLC DISSOLUTION OR WITHDRAWAL
JERRY-MARK PALM VIEW, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2016 NOV 16 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jerry- Mark Palm View, LLC

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles H. Gelman, Esquire
(Name of Person)

Charles H. Gelman, P.L
(Firm/Company)

25 SE 2 Avenue, Suite 1025
(Address)

Miami, Florida 33131
(City/State and Zip Code)

For further information concerning this matter, please call:

Charles H. Gelman at (305) 579-9100
(Name of Person) (Phone 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, Florida 32314

Street /Courier Address
Registration Section
Divisions of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the limited liability company is: Jerry- Mark Palm View, LLC.
2. The Articles of Organization were filed on January 9, 2006 and assigned document number L06000003086.
3. The delayed effective date of the dissolution if not effective on the date of filing: n/a
[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 be listed as the document's effective date on the Department of State's records.

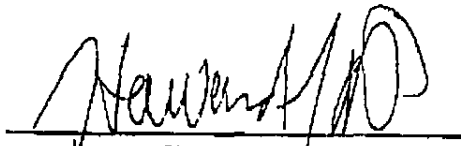
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

The consent of all of the members

5. The name and address of the person appointed to wind up the company's activities and affairs:

Howard Taft (member)
2843 S Bayshore Drive
Apt 12 F
Miami, Florida 33133

6. Signature of 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

Howard Taft
Printed Name

FILING FEE: \$25.00