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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : VOGEL LAW OFFICE, P.A.

Account Number : 120030000100 Phone : (239)262-2211

Fax Number : (239)262-8330

LLC DISSOLUTION OR WITHDRAWAL THE RETREAT AT PORT OF THE ISLANDS, LLC

Certificate of Status	1
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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is THE RETREAT AT PORT OF THE ISLANDS, LLC		
2.	The Articles of Organization were filed on 03/22/2006 and assigned		
	document number L06000030647		
	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.	DEC 2	HANDLOS OS SONATE
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).	% ♣	0.83.5
	The consent of all the members.	AM 10:	7: :-
	The consent of all the members.	17	7
	The consent of all the members.		
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 al	Signature of an authorized person or if there are no members, the signature of the person appointed and bove to wind up the company's acrivities and affairs:	liste	1
	James D. Vogel		
	Signature Printed Name		
	FILING FEE: \$25.00		