

From:

Division of Corporations

03/14/2017 18:16

#612 P.001/003

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L06000046731

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC
Account Number : I20020000144
Phone : (305) 520-2344
Fax Number : (305) 520-2400

**LLC DISSOLUTION OR WITHDRAWAL
FLAGLER BOCA 54, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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MAR 16 2017

From:

03/14/2017 18:17

#612 P.002/003

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Flagler Boca 54, 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:

Kolleen Cobb

(Name of Person)

(Firm/Company)

2855 Le Jeune Rd., 4th Floor

(Address)

Coral Gables, FL 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

Jessica Perez

(Name of Person)

at (305) 520-2366

(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

From:

03/14/2017 18:17

#612 P.003/003

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Flagler Boca 54, LLC

2. The Articles of Organization were filed on 5/5/2006 and assigned

document number L06000046731

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 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 member voted for dissolution as the entity was no longer conducting business and has no assets.

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. 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

Kolleen Cobb, Vice President

Printed Name

FILING FEE: \$25.00