107000041493

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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789 4089 671				

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L07-41493



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SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE

M. Thomas JAN 2 2 2008



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 2, 2008

KELLI ANN AUSTIN 517 SUNSET BLVD MELBOURNE BEACH, FL 32951

SUBJECT: AUSTIN PROPERTIES, LLC

Ref. Number: L07000041493

We have received your document for AUSTIN PROPERTIES, 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):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please cal (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 908A00000059

COVER LETTER

•	TO: Registration Section Division of Corporations				
•	SUBJECT: Austin Properties, LLC (Name of Limited Liability Company)				
	(Name of Entitled Elability Company)				
	The enclosed Articles of Dissolution and fee(s) are submitted for filing.				
	Please return all correspondence concerning this matter to the following:				
	Kelli Am Austin (Name of Person)				
	Austin Properties, LLC (Firm/Company)				
	517 Sunset Blvd (Address)				
	Melbourne Beach FL 32951 (City/State and Zip Code)	~ :			
For further information concerning this matter, please call:					
	Kelli Austin at 321 223-341 Cmg (Name of Person) (Area Code & Daytime Telephone Number)		FILED		
	Enclosed is a check for the following amount:	PM 2: 59			
1	\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)	ed)			

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	
· Austin Properties	LC
2. The Articles of Organization were filed on 35	1707 4/18/07 and assigned document number
3. The date the dissolution was approved: Nove	uber 444, 2007 Kelli
4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov	d liability company's dissolution pursuant to section er letter).
The LLC has not	been beneficial to my
business. I have h	ad problems with other
companies with ex	act same name. Please
dissolve immediate	10/
5. CHECK ONE:	5. O
	ebts, obligations and liabilities pursuant to s
All remaining property and assets have been distribut rights and interests.	ed among its members in accordance with the respective
7. CHECK ONE:	වූසි <i>:</i>
There are no suits pending against the compa -OR-	•
Adequate provision has been made for the sa entered against it in any pending suit.	tisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of r	nembership interests necessary to approve the dissolution:
Signature	Printed Name
Kelli aust	Kelli Austin