L07000053744

| (Requestor's Name) | | |
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| (Address) | | |
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| (City/State/Zip/Phone #) | | |
| PICK-UP | ☐ WAIT | MAIL |
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| (Business Entity Name) | | |
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| (Do | ocument Number) | |
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| Certified Copies | _ Certificates | of Status |
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| Considerations to Filips Officer | | |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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12/04/08--01015--009 **25.00

TIME DEC -3 AM II: 28

C. LEWIS

12-4-08

EXAMINER

COVER LETTER

| Division of Corporations | | | |
|--|--|--|--|
| SUBJECT: Atlantic Patch Holdings LLC (Name of Limited Liability Company) | | | |
| (cannot a manage and party) | | | |
| The enclosed Articles of Dissolution and fee(s) are submitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | |
| Chris Sousa (Name of Person) | | | |
| (Name of Person) | | | |
| Atlantic Patch Holdings, LLC (Firm/Company) | | | |
| 3804 N. John Young Pkwy #17 | | | |
| Orlando, FL 32804 (City/State and Zip Code) | | | |
| (City/State and Zip Code) | | | |
| For further information concerning this matter, please call: | | | |
| (Name of Person) at (321) 229 - 5074 (Area Code & Daytime Telephone Number) | | | |
| (Name of Person) (Area Code & Daytime Telephone Number) | | | |
| Enclosed is a check for the following amount: | | | |
| \$25.00 Filing Fee Certificate of Status & Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 20, 2008

CHRIS SOUSA ATLANTIC PATCH HOLDINGS, LLC 3804 N. JOHN YOUNG PKWY, #17 ORLANDO, FL 32804

SUBJECT: ATLANTIC PATCH HOLDINGS, LLC

Ref. Number: L07000053744

We have received your document for ATLANTIC PATCH HOLDINGS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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) 245-6047.

Letter Number: 308A00057945

Carolyn Lewis Regulatory Specialist II

District of Comparations DO DOV 6997 Tollahagges Florida 99914

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2000 DEC -3 AM II: 26

| | SECRETARY OF STATE FALLAHASSEE. FLORID |
|--|---|
| 1. The name of a limited liability company is | |
| Attantic Croid Atlantic Pa | itch Holdings, LLC |
| 2. The Articles of Organization were filed on5 | 21/07 and assigned document number |
| L07000053744 | • |
| 3. The date the dissolution was approved: | <u>/08</u> |
| 4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back covered to the control of the co | · |
| Closed Bu | s; nass |
| | |
| | |
| | |
| 5. CHECK ONE: | • |
| | nited liability company have been paid or discharged. |
| OR- Adequate provision has been made for the del | bts, obligations and liabilities pursuant to s. 608.4421. |
| All remaining property and assets have been distribute rights and interests. | ed among its members in accordance with their respective |
| 7. CHECK ONE: | |
| There are no suits pending against the compar | ny in any court. |
| OR-Adequate provision has been made for the sat 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 m | nambarchin interests recognize to approve the dissolution. |
| or the members having the same percentage of m | ichiociship interests necessary to approve the dissolution. |
| Signature | Printed Name |
| Chi Some | Chris Sousa |
| will HOS | willow H. Osborne |
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