L070007665H

(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:





700302491257

08/14/17--01043--009 **25.00



COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Presidio Capital, 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:

Presidio Capital, LLC

(Firm/Company)

912 W. Platt St, Ste 200

(Address)

Tampa, FL 33606

(City/State and Zip Code)

For further information concerning this matter, please call:

Ron K. Bailey

549-6140

(Name of Person)

(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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability compan	ny is
Presidio Capital, LLC	
2. The Articles of Organization were filed	d on and assigned
document number L07000076684	
3. The delayed effective date the dissolut (effective date cannot be Note: If the date inserted in this block do listed as the document's effective date on	be prior to or more than 90 days later than date document is received for filing) best not meet the applicable statutory filing requirements, this date will not be
4. A description of occurrence that result 605.0707, Florida Statutes, (copy 605.0	ed in the limited liability company's dissolution pursuant to section 0707 on back cover letter).
REAL ESTATE SOLD LLC REDUNDAN	NT.
5. If there are no members, enter the nam	e and address of the person appointed to wind up the company's
activities and affairs:	
6. Signature of an authorized person or if listed above to wind up the company's ac	there are no members, the signature of the person appointed and tivities and affairs:
312 M	
KIDEY	RON K. BAILEY
Signature	Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Presidio Capital, LLC	
Document number of Limited Liability Company is: L07000076684	
Date of dissolution was: July 1, 2017	 -
Description of information that must be included in a written claim:	
Claims must be made in writing and include the	claim amount,
basis and origination date. The deadline for sub	omitting claims
is October 31, 2017.	57/ Td
	= [
Mailing address where claims can be sent: (Claims cannot be sent to the Division Presidio Capital, LLC	of Corporations)
912 W. Platt St, Ste 200	
Tampa, FL 33606	
A claim against the above named limited liability company will be barred unless	a proceeding to enforce the
claim is commenced within 4 years after the filing of this notice.	1
Ron K. Bailey	1 St
Printed Name of the Person Filing Signature of	of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00