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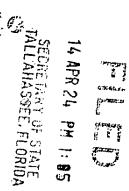
(Re	equestor's Name)	
(Ad	ldress)	
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COVER LETTER

Div	rision of Corporations			
SUBJECT:	Gordon 4140, LLC			
SUBJECT.	(Name of Limit	ed Liability Compar	ny)	
The enclosed	d Articles of Dissolution and fee(s) are submit	ted for filing.		
Please return	n all correspondence concerning this matter to	the following:		
	Laird A. Lile, Esq.			
	(Nar	ne of Person)		
	Laird A. Lile, P.A.			
	(Fin	m/Company)		
	3033 Riviera Drive, Suite 104			
	((Address)		
	Naples, Florida 34103			
	(City/Sta	nte and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
For further in	nformation concerning this matter, please call	:		
Laird A. Lile		239	649-7778	
	(Name of Person)	at ((Area Co	ode & Daytime Telephone Number)	
Enclosed is a	check for the following amount:			
√ \$25	.00 Filing Fee and Certificate of Dissolution		g Fee, Certificate of Dissolution & opy (additional copy is enclosed)	
	MAILING ADDRESS:	STR	EET/COURIER ADDRESS:	

Registration Section

TO:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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 Gordon 4140, LLC
	GOIGOII 4140, LEC
2.	The Articles of Organization were filed on August 27, 2007 and assigned
	document number <u>L07000087339</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: Date of Filing (effective date cannot be prior to or more than 90 days later than date document is received for filing)
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).
	Gordon 4140, LLC is dissolved pursuant to written consent to the dissolution
	by the sole member, which is the occurrence of an event specified in the Operating
	Agreement causing dissolution. See Fla. Stat. §§ 605.0701(1) and 608.441(1)(b).
-	If the company and a the company delices of the company to the company to
э.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: N/A
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
_	Susan P. Davis, Trustee of the Mariner Trust
	Signature Printed Name
	FILING FEE: \$25.00