Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000100126 3)))



H210001001263ABCN

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAW OFFICES OF PAUL R. SASSO

Account Number : 120170000049

Phone

: (305)234-2586

Fax Number

: (305)234-2584

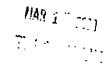
LLC DISSOLUTION OR WITHDRAWAL 1506 TEQUESTA, L.L.C.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

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H210001001263

COVER LETTER

| | ication Section ion of Corporations | | | | | |
|--|--|---|--|--|--|--|
| emprect. | 1506 Tequesta, LLC | | | | | |
| SUBJECT: _ | (Name of Limite | ed Liability Company) | | | | |
| The enclosed | Articles of Dissolution and fee(s) are submitt | ed for filing. | | | | |
| Please return a | all correspondence concerning this matter to | the following: | | | | |
| | Paul R. Sasso, Esquire | | | | | |
| | (Nan | ne of Person) | | | | |
| | Law Offices of Paul R. Sasso | | | | | |
| | (Firm/Company) | | | | | |
| | 12384 SW 82nd Avenue | | | | | |
| | (Address) | | | | | |
| | Pinecrest, FL 33156 | | | | | |
| | (City/Sta | ate and Zip Code) | | | | |
| For further in | formation concerning this matter, please call | : | | | | |
| Paul | R. Sasso | 305 234-2586 at () | | | | |
| | (Name of Person) | (Area Code & Daytime Telephone Number) | | | | |
| Enclosed is a c | heck 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 Address: | | | | |
| | | Registration Section Division of Corporations | | | | |
| | | The Centre of Tallahassee | | | | |
| | | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | | |

H210001001263

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| - | The name of a limited liabili 1506 Toquesta, LLC, a Florid | | pany | | ·•' |
|----|---|--|--|--|-------------|
| • | The Articles of Organization | were filed on Aug | rust 29, 2007 | and assigned | |
| | locument numberL070000 | | | | |
| • | The delayed effective date the (effective Note: If the date inserted in the listed as the document's effective forms. | date cannot be prior to or his block does not mee | r more than 90 days later it the applicable statute | than date document is received for number of filing requirements, this date will | g) not l |
| ć | A description of occurrence 05.0707, Florida Statutes, (| that resulted in the licopy 605.0707 on ba | imited liability comp ick cover letter). | pany's dissolution pursuant to sec | tion |
| _ | Company no longer conduction | g business | | | _ |
| _ | Company no longer conducting | g business | | | |
| | Company no longer conducting | g business | | | |
| | If there are no members, ent | | ress of the person ap | ppointed to wind up the company | s:::::2 |
| | | | | , <u></u> | <u>-</u> |
| | | | | 2 | |
| | | | | σ | |
| | | | | r: G | ភ ភ |
| | | <u> </u> | | | _ |
| 76 | Signature of an authorized pye to wind up the company | erson or if there are 's activities and affai | irs: | mature of the person appointed an | id lis |
| | 111/1/1 | | Paul R. Sasso, | | _ |
| | Signature | | | Printed Name | |
| l | | FILIN | IG FEE: \$25.00 | | |

H 210001001263

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: |
|--|
| Document number of Limited Liability Company is: |
| Date of dissolution was: |
| Description of information that must be included in a written claim: |
| Company no longer conducting business |
| |
| |
| |
| |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) |
| Paul R. Sasso, Esquire / 12384 SW 82nd Avenue, Pinecrest, FL 33156 |
| |
| |
| |
| |
| 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. |
| Paul R. Sasso, Esquire |
| Printed Name of the Person Filing |

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