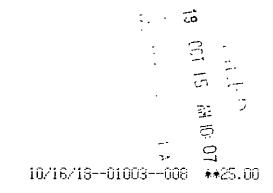
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(Requ	estor's Name)			
(Addre	ess)			
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(City/S	State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Busin	ness Entity Name	e)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

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2018 OCT 15 AM 9: 45

# **COVER LETTER**

TO:

Registration-Section Division of Corporations

SUBJECT:

Anasazi Property 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:

Peggy Schneider	
(Name of Person)	
Anasazi Property LLC	
(Firm/Company)	
6841 South Grande Dr	
(Address)	
Boca Raton FL 33433	
(City/State and Zip Code)	

For further information concerning this matter, please call:

Shawn Baca at (561) 716 8546 (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 company is				
	Anasazi Property LLC				
2.	The Articles of Organization	n were filed on $\frac{10/047}{1}$	2007 and assigned		
	document number L0700010	01284	<u> </u>		
3.	The delayed effective date the dissolution if not effective on the date of filing:  (effective date cannot be prior to or more than 90 days later than date document is received for filing)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.				
4.	A description of occurrence 605.0707, Florida Statutes,	that resulted in the ling to the copy 605.0707 on back	mited liability company's dissolution pursuant to section cover letter).	on	
	Completed goals				
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			· · · · · · · · · · · · · · · · · · ·	٠	
				• -	
	WYSHA IRA		· · · · · · · · · · · · · · · · · · ·		
5.	If there are no members, en activities and affairs:	ter the name and addre Peggy Schneider	ess of the person appointed to wind up the company's	3	
		6841 South Grande D	r		
		Boca Raton FL 3343	3		
6. Iis	Signature of an authorized pated above to wind up the con	erson or if there are n	no members, the signature of the person appointed and affairs:		
ı	Rand Chreide Signature	<u></u>	Peggy Schneider Printed Name		

FILING FEE: \$25.00