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10/20

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 10879 GRANDE BLVD, 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:
KENNETH KAHN (Name of Person)
(Firm/Company)
118 COTTAGE LA (Address)
BLAUVELT NY. 10913 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (845) 359 8557 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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					
10879 GRANDZ	BLVD.	LLC			
2. The Articles of Organization were filed on/	_		docume	nt num	ber
3. The date the dissolution was approved:	0/1/08	·			
4. A description of occurrence that resulted in the lin 608.441, Florida Statutes, (copy 608.441 on back	mited liability compar cover letter).	ny's dissolution pursua	nt to sec	ction	
NO LONGER IN B	USINESS		료	· 🗢 ·	
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				<u></u>	i v
5. CHECK ONE:			1∟,≪Σ ε ^{±1} _⊥1	2	7
All debts, obligations and liabilities of th OR-Adequate provision has been made for the	•			ັພ	W. Carr
All remaining property and assets have been distr rights and interests.	ibuted among its men	nbers in accordance wi	th their	respec	tive
7. CHECK ONE:					
There are no suits pending against the co	mpany in any court.				
OR- Adequate provision has been made for the entered against it in any pending suit.	•	udgment, order or dec	ree whic	h may	be
Signatures of the members having the same percentage	of membership intere	ests necessary to appro	ve the d	issoluti	ion:
Signature		Printed Name			
Kennett fache	_K	ENNETH	Kt	1 H1	<u>ე</u>
Musicaj Kalu		ANCY			

FILING FEE: \$25.00