## L07000127611

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800324532608

02/13/19--01010--006 \*\*25.00

FILLUIU 19 FEB 13 PH 4: 4 15 INNSSEEL PLORID

FEB 1 8 2019 **S. YOUNG** 

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: 120	35 NE 2	AVENUE 306, LLC d Liability Company)
	(Name of Limite	d Liability Company)
The enclosed Articles of Dissolution	n and fee(s) are submitte	ed for filing.
Please return all correspondence co	ncerning this matter to t	he following:
	PATRICK L (Nam	e of Person)
	(Firm	VCompany)
	501 GRAN	1) Contoudse
		Hopes, LL 33/38 e and Zip Code)
For further information concerning	this matter, please call:	
PATRICK 1	Person)	at ( 305 ) 752 - 500 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following as	mount:	
\$25.00 Filing Fee and Certifi	cate of Dissolution	□ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
MAILING AI Registration Se		STREET/COURIER ADDRESS: Registration Section
Division of Co P.O. Box 6327	rporations	Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	
12035 NE 2 AVENUE 306, LLC	
2. The Articles of Organization were filed on 12/27/2007 and assigned	
document number LU7000 127 61)	
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 that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	
ALL CONFORME ASCETS SOUD IN 2018 5	
0 TO TO TO THE TOTAL THE TOTAL TO THE TOTAL THE TOTAL TO	
5. If there are no members, enter the name and address of the person appointed to wind up the company's	
activities and affairs: DATATOK L. DUFFY, REGISTERED ACT	ENT
501 GRAND CONCOURSE	
MIANU SHEATS, FZ 3338	
PATDOFFY(@ USA. NET (305) 258-5600	
6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:	
format 1. Delle Berton	
Signature Printed Name	

**FILING FEE: \$25.00**