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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : JONES, FOSTER, JOHNSTON & STUBBS,

Account Number : 076077003231 : (561)650-0471 Phone

: (561)650-5300 Fax Number

## LLC DISSOLUTION OR WITHDRAWAL LAS PIEDRAS, LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$55.00

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H190001100403

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

ι.	The name of a limited liabilities Picdras, LUC	ty company is		V <sub>6</sub>	·	
2.	The Articles of Organization	were filed on March 27.	2008	and assigned		
	document numberL080	00031268	•			
3.	The delayed effective date the (effective of Note: If the date inserted in the listed as the document's effect	is block does not meet the	applicable statutory filing	ng: Upon filing e document is received g requirements, this da	for filing) ate will not be	
4.	A description of occurrence 605.0707, Florida Statutes, (	that resulted in the limite copy 605.0707 on back c	ed liability company's over letter).	dissolution pursuan	nt to section	
	Entity has ceased doing business	is			<del></del>	
					SEGNAL	
				,	760 E	në.
5.	. If there are no members, ent activities and affairs:	er the name and address Slo Track, LLC	of the person appointe	d to wind up the co	impany's 3	
	2101 S. Congress Avenue					
Delray Beach, FL 33445						
6 li	. Signature of an authorized parties above to wind up the cor	person or if there are no r npany's activities and aff	nembers, the signature	of the person appo	ointed and	
	(type		Peter S. Holton, Esq.			
	Signature		Prin	ted Name		

FILING FEE: S25.00

## 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: Las Piedras, LLC	-	
Document number of Limited Liability Company is: L08000031268  Date of dissolution was:	•	
Description of information that must be included in a written claim:		
Name of claimant, amount of claim, basis of claim, statement	-	
regarding whether claim is secured, priority, unsecured,	-	
contingent, conditional or unmatured.	_	
	~	
	2019,¢	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	APR -3	APPRO AND FILE
2101 S. Congress Avenue	AM IO: 3	0 45.0
Delray Beach, FL 33445	မှ ယ	
	_	

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.

Peter S. Holton

Printed Name of the Person Filing

Signature of the Person Filing

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