# L0800054030

(D						
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

THE WATERMARK 910, L.L.C.

(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:

(Name of Person)

Tax & Accounting Solutions

(Firm/Company)

1747 Rodman St. Ste. 205

(Address)

Hollywood, FL 33020

(City/State and Zip Code)

For further information concerning this matter, please call:

Carlos Gonzalez

(Name of Person)

(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 liabil	ity company is						
	THE WATERMARK	910, L.L.C.						
2.	The Articles of Organization document number L08000	_ and assigned						
3.	The delayed effective date t	he dissolution if not effective	ve on the date of filing:					
4.	A description of occurrence 605.0707, Florida Statutes, (	copy 605.0707 on back cov	er letter).		lo sec	ction		
	Voluntarily dissolution	. The business purpo	se of the LLC is o	completed.				
			<del></del>					
					· <del></del>			
5.	If there are no members, ent		the person appointed to	wind up the comp	oany '	's		
	activities and affairs:	Cesar Shlain				<del>1</del> %)		
		2020 NE 163 Street	t 300D		• ;	<u></u>		
		Miami, FL 33162		4-	!	<u> </u>	ľ	
					<del></del>		A dealer i	
6, ab	Signature of an authorized pove to wind up the company	person or if there are no mer s activities and affairs:	nbers, the signature of	the person appoint	ed ar	nď list	ted !	
	Signature		Printed 1	1	. (	သ္ ၂၅		
			Cesar Shlain			_		
FILING FEE: \$25.00								