(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:			

Office Use Only



400265905434

10/31/14--01023--018 \*\*25.00

14 OCT 31 AHII: 21
SECRETARY OF STATE
TALLAHASSEE, FLORIC

1:0V :: 4 2014 T. HAMPTON



Gail Partlow
612.335.1636 DIRECT
612.335.1657 DIRECT FAX
gail.partlow@stinsonleonard.com

October 28, 2014

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: 9102, LLC

Our File No: 2064032-0003

Dear Sir/Madam:

Enclosed for filing are Articles of Dissolution for 9102, LLC. A check in the amount of \$25.00 is enclosed to cover the filing fee.

Please return proof of filing to the undersigned in the self-addressed envelope provided. Thank you.

Sincerely,

STINSON LEONARD STREET LLP

Gail Partlow Paralegal

/gep Encs.

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJI	9102, LLC	
		ted Liability Company)
The en	nclosed Articles of Dissolution and fee(s) are submit	ted for filing.
	return all correspondence concerning this matter to	· ·
	Gail E. Partlow	
	(Na:	ne of Person)
	Stinson Leonard Street LLP	
	m/Company)	
(Firm/Company)		
150 South 5th Street, Suite 2300		
(Address)		(Address)
	Minneapolis, MN 55402	
	(City/Sta	tte and Zip Code)
For fur	ther information concerning this matter, please call	
	Gail Partlow	612 335-1636
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclose	ed is a check for the following amount:	
	\$25.00 Filing Fee and Certificate of Dissolution	<ul> <li>\$55.00 Filing Fee, Certificate of Dissolution &amp; Certified Copy (additional copy is enclosed)</li> </ul>
	MAILING ADDRESS:	STREET/COURIER ADDRESS:
	Registration Section	Registration Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is 9102, LLC
2.	The Articles of Organization were filed onand assigned
	document number L08000082607
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)
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 of the members of the company consented to the dissolution.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
6. li:	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
_	Mary Talmage, General Manager, and
	Signature Printed Name Sole Members FILING FEE: \$25.00
	OF STATE. 2