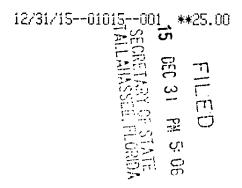
# 10800009914

(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



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JAN 0 4 2016 S. YOUNG

### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: PONDUIEW INVESTMENTS 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:

JAMES R. BAKER

(Name of Person)

PONDUIEU INVESTMENTS LLC

(Firm/Company)

13741 PONDUIEN CIACLE

(Address)

MAPLES FI. 34119

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES R. BAKER

390 0546

(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

# **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:	DOND MIEM	INVESTMENTS	LLC	
Document number of Limited Liability Co	ompany is: LO 8	0000 98914		
Date of dissolution was: DEC 30				
Description of information that must be in	cluded in a written	claim:		
NONE				
				<del></del>
Mailing address where claims can be sent:	(Claims cannot be	sent to the Division of	Corporations)	<b>대</b> 으
13741 PONOVIEW	CINCLE		EASSA MARA	FILE BEC 31
NAPLES F1. 341				R R D
				30 S: 06
A claim against the above named limited l	iability company w	ill he harred unless a nr	oceeding to enfo	rce the
claim is commenced within 4 years after the			-	ree the
JAMES R. BAKEN		NI T	$\geq \int$	
Printed Name of the Person Filing	<u> </u>	Signature of the	e Person Filing	

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

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabili	company is		
PONDUIEW INVES	MENTS LLC		
2. The Articles of Organization	vere filed on OCZ Z	Y 2008 and assig	ned
document number <u>LO &amp;</u>	000 98914		
Note: If the date inserted in the	dissolution if not effective on the te cannot be prior to or more than 90 days block does not meet the applicable that on the Department of State's in the cannot be determined by the cannot be prior to or more than 90 days block does not meet the applicable by the cannot be determined by the cannot be determi	statutory filing requirements	· · · · · · · · · · · · · · · · · · ·
4. A description of occurrence 605.0707, Florida Statutes, (c	at resulted in the limited liability py 605.0707 on back cover letter	company's dissolution p	oursuant to section
LACK OF PROJETA	• •	,	
	· /		
***************************************			
			TASE 5
			题 B T
5. If there are no members, enter	the name and address of the pers	son appointed to wind up	the company's
activities and affairs:	JAMES R. BAKER		7.51
	13741 PONOVIEU	CIRCLE	50 A C
	NAPLES FI. 341	19	
			· · · · · · · · · · · · · · · · · · ·
6. Signature of an authorized polisted above to wind up the com	son or if there are no members, t any's activities and affairs:	he signature of the person	n appointed and
Junes P. Bah		TAMES R. BAKE	, <b>L</b> _
Signature		Printed Name	

**FILING FEE: \$25.00**