

LCB000103423

(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



500296404845

03/10/17--01021--004 **55.00

FILED
2017 MAR 10 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
MAR 13 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2 Park Place, 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:

Marvin B. Katz

(Name of Person)

2 Park Place, LLC

(Firm/Company)

6820 San Marino Dr. Apt. 603

(Address)

Naples, FL 34108-7550

(City/State and Zip Code)

For further information concerning this matter, please call:

Marvin B. Katz

(Name of Person)

239

594-2066

at () _____

(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**

FILED
2017 MAR 10 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
2 Park Place, LLC

2. The Articles of Organization were filed on Nov. 4, 2008 and assigned

document number L08000103423

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).

Property has been sold; no longer a need for an LLC

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Marvin B. Katz

6820 San Marino Dr. Apt. 603

Naples, FL 34108-7550

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:

Marvin B. Katz
Signature

Marvin B. Katz

Printed Name

FILING FEE: \$25.00

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: 2 Park Place, LLC

Document number of Limited Liability Company is: L08000103423

Date of dissolution was: 3/10/2017

Description of information that must be included in a written claim:

Name, address, social security number, telephone number of person filing claim,

description and nature of claim, include date and time of claim incident.

If a corporation, corporation name, address, corporate federal ID number, telephone number, name, title and social security number of officer filing claim on behalf of the corporation, include date and time of claim incident.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Marvin B. Katz 6820 San Marino Dr. Apt. 603

Naples, FL 345108-7550

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.

Marvin B. Katz

Printed Name of the Person Filing

Marvin B. Katz
Signature of the Person Filing

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

FILED
2017 MAR 10 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA