

L09000058777

(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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08/08/16--01029--007 **25.00

2016 SEP -7 A 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

SEP 08 2016

91 HILL AVENUE, LLC

1340 Gulf Blvd., 5E
Clearwater, FL 33767
813-920-4198

August 30, 2016

Ms. Stacey M. Warren
Regulatory Specialist II
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

2016 SEP -7 PM 5:07
MAIL ROOM

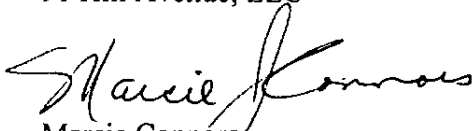
RE: 91 Hill Avenue, LLC Dissolution

Ms. Warren,

Sorry for not including the proper documentation back on August 2, 2016, with our Dissolution paperwork. Hopefully, everything we need is included in this transmittal. Our check for \$25.00 was previously submitted on August 2 for the filing fee.

Please advise if you should need anything further and when the LLC has been dissolved. I will then contact Deborah Bruce to process my resignation form as Registered Agent. Thank you for your time.

91 Hill Avenue, LLC


Marcie Connors
Registered Agent



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 11, 2016

MARCIE CONNORS
1340 GULF BLVD., 5E
CLEARWATER, FL 33767

SUBJECT: 91 HILL AVENUE, LLC.
Ref. Number: L09000058777

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 416A00017048

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 91 Hill Avenue, LLC

DOCUMENT NUMBER: 27-0852356

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marcie Connors

(Name of Contact Person)

91 Hill Avenue, LLC

(Firm/Company)

1340 Gulf Blvd., 5E

(Address)

Clearwater, FL 33767

(City/State and Zip Code)

For further information concerning this matter, please call:

Marcie Connors

(Name of Contact Person)

at

813

(Area Code)

920-4198

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment 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 liability company is

91 Hill Avenue, LLC

2. The Articles of Organization were filed on 6/3/09 and assigned

document number 409000058777

3. The delayed effective date the dissolution if not effective on the date of filing: N/A
(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 and business was sold 5/24/16

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

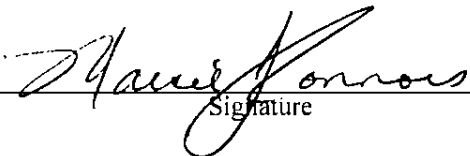
Marcie Connors

Registered Agent

1340 Gulf Blvd., SE

Clearwater, FL 33767

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:


Signature

MARCIE J. Connors
Printed Name

FILING FEE: \$25.00

(paid)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 SEP -7 A 9 31

FILED