L0900080353

/		
(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone #	<i>f</i>)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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01/29/16--01011--004 **75.00



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February 1, 2016

PETER PERRI 65 NE 4TH AVENUE #H DELRAY BEACH, FL 33483

SUBJECT: SW 400 4TH LLC Ref. Number: L09000080253

We have received your document for SW 400 4TH LLC and your check(s) totaling \$75.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Statement of Termination may be filed after the limited liability company has completed winding up and after a voluntary dissolution has been filed with this office. See section 605.0709(7), Florida Statutes for reference.

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.

Letter Number: 016A00002106

Stacey M Mason Regulatory Specialist II

www.sunbiz.org

COVER LETTER

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TO: Registration Section Division of Corporations				
SUBJI	ест:	U 400	444	LLC
	•		(Name of Limit	ed Liability Company)
The en	closed Articles	of Dissolution and f	ee(s) are submitt	ted for filing.
Please	return all corres	pondence concernir	g this matter to	the following:
		Peter	Perr	ne of Person)
			(Nan	ne of Person)
			(Fin	n/Company)
		65 N.E	5. 4m	Ave
	_1	clray	Beuch	Address) Te and Zip Code)
For fur	ther information	concerning this ma	tter, please call:	·
	Peta	Perri		at (561) 441 - 1125
		(Name of Person)	1	(Area Code & Daytime Telephone Number)
Enclose	d is a check for th	e following amount:		
C	3 \$ 25.00 Filing F	ee and Certificate of I	Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
		ILING ADDRE	SS:	STREET/COURIER ADDRESS:
	_	istration Section ision of Corporat	ions	Registration Section Division of Corporations
	P.O.	Box 6327		Clifton Building
	Tall	ahassee, FL 3231	14	' 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. '	The name of a limited liability company is SW H00 HYM LLC	
2. ′	The Articles of Organization were filed on 8/19/2009 and assigned	•
(document number <u>L09000080253</u>	
3. 7	The delayed effective date the dissolution if not effective on the date of filing: Ol-01-16 (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 n listed as the document's effective date on the Department of State's records.	ot be
ł. 7 6	A description of occurrence that resulted in the limited liability company's dissolution pursuant to sect 05.0707, Florida Statutes, (copy 605.0707 on back cover letter).	ion
_		
	f there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	
	65 N.E. 4th Are H	
	Delray Beach FL. 33	483
5. S iste	signature of an authorized person or if there are no members, the signature of the person appointed and d above to wind up the company's activities and affairs:	
	Lt. Peter Perrie 3 Printed Name Printed Name	
	FILING FEE: \$25.00	T m O
	OF STATI	