

L09000091193

(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



000266227790

11/10/14--01006--009 **25.00

EFFECTIVE DATE
11-30-2014

FILED

2014 NOV 10 PM 12:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. BALLY
EXAMINER

NOV 18 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Villas AP, 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:

Michael Antonopoulos

(Name of Person)

(Firm/Company)

103 Sea Hammock Way

(Address)

Ponte Vedra Beach, Florida 32082

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Antonopoulos

(Name of Person)

904

at ()

361-8193

(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

EFFECTIVE DATE
11-30-2014

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
2014 NOV 10 PM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Villas AP, LLC

2. The Articles of Organization were filed on September 21, 2009 and assigned
document number L09000091193

3. The delayed effective date the dissolution if not effective on the date of filing: November 30, 2014
(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).
Liquidated all assets, no further business.

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

103 Sea Hammock Way

Ponte Vedra Beach, FL 32082

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

Michael Antonopoulos

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: Villas AP, LLC

Document number of Limited Liability Company is: L09000091193

Date of dissolution was: November 11, 2014

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

Name, address and contact of claimant, description of claim, copy of authorization for work or materials provided, copy of original invoice/charge.

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

Michael Antonopoulos

103 Sea Hammock Way

Ponte Vedra Beach, Florida 32082

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.

Michael Antonopoulos

Printed Name of the Person Filing

Michael Antonopoulos

Signature of the Person Filing

Digitally signed by Michael Antonopoulos
DN: cn=Michael Antonopoulos, o=ou,
email=me-llc@comcast.net, c=US
Date: 2014.11.06 21:41:24 -0500

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

FILED
2014 NOV 10 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA