

209 000108894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

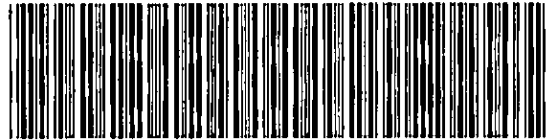
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 APR 19 AM 7:16
JUN 09 2021

D. BRUCE
JUN 09 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CYPRESS 813, 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:

JORGE R SALCEDO

(Name of Person)

SALCEDO ATTORNEYS AT LAW P.A.

(Firm/Company)

200 S BISCAYNE BLVD. SUITE 2700

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

JORGE R SALCEDO

(Name of Person)

305

375-0640

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2021 APR 19 AM 7:16
TALLAHASSEE
FILING

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

CYPRESS 813, LLC

2. The Articles of Organization were filed on 11/12/2009 and assigned

document number L09000108894

3. The delayed effective date the dissolution if not effective on the date of filing: 12/22/2020
(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).

Resolutions approving dissolution of the company were adopted unanimously by

the members, as permitted by the Florida Revised Limited Liability Company Act.

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

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

RAFAEL A SUCRE

Printed Name

FILING FEE: \$25.00

2021 APR 19 AM 7:16

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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: CYPRESS 813, LLC

Document number of Limited Liability Company is: L09000108894

Date of dissolution was: 12/22/2020

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

Claims shall be in writing and include:

1. Name and address of claimant;

2. Claim amount;

3. Basis for the claim

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


813 CYPRESS BLVD., #V-54

POMPANO BEACHE, FL 33069

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.

RAFAEL A SUCRE

Printed Name of the Person Filing


Signature of the Person Filing

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