

109000121328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SEAL OF STATE
TALLAHASSEE, FLORIDA

SEP 07 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **BLACK LAKE VILLAGE, L.L.C.**
(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:

JAMES SWANN

(Name of Person)

BLACK LAKE VILLAGE, L.L.C.

(Firm/Company)

516 DELANNOY AVENUE

(Address)

COCOA FL 32922-7814

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES SWANN

(Name of Person)

at (**321**) **631-2022**

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 25, 2016

JAMES SWANN
516 DELANNOY AVENUE
COCOA, FL 32922-7814

SUBJECT: BLACK LAKE VILLAGE, LLC
Ref. Number: L09000121328

2016 SEP -1 AM 11:13
TALLAHASSEE, FLORIDA

We have received your document for BLACK LAKE VILLAGE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Notice of Dissolution must contain a description of information that should be included in a written claim.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 416A00018083

Please process without the Notice of Company Dissolution.

Thank you

2016 SEP -1 PM 2:15
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

1. The name of a limited liability company is
BLACK LAKE VILLAGE, L.L.C.

2. The Articles of Organization were filed on 12/22/2009 and assigned
document number L09000121328

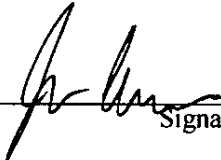
3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this 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).

The Purpose and Powers of the Company outlined in the Operating Agreement have been fulfilled and all of the
members have agreed to dissolve the company.

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

JAMES SWANN

Printed Name

FILING FEE: \$25.00

FILED
16 SEP -1 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA