

L10000006/65

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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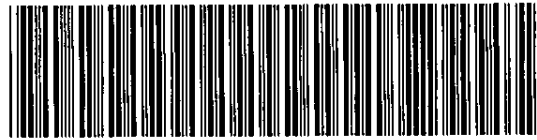
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 17 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 36 Isla Bahia 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:

Christopher B. Knox

(Name of Person)

CHRISTOPHER B KNOX, P.A.

(Firm/Company)

1520 East Oak Knoll Circle

(Address)

Davie, FL 33324

(City/State and Zip Code)

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STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Christopher B. Knox at 954 476-9997

(Name of Person)

(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

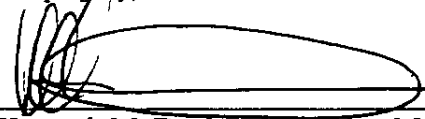
STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
of
36 ISLA BAHIA LLC

1. The name of the limited liability company is **36 Isla Bahia, LLC**.
2. The Articles of Organization were filed on January 15, 2010 and assigned document number **L10000006165**.
3. The occurrence that resulted in the dissolution of the limited liability company pursuant to **§605.0707** of the Florida Statutes is the consent of all the Members.
4. Signature of the authorized Managing Member of 36 Isla Bahia, LLC:

I hereby certify that, under penalties of perjury, the information on this document is true and accurate.


Kenneth M. Devino, Managing Member

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA