110000065254

(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



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04/18/14--01009--004 **25.00

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2014 APR 18 AMII: 39
SECREJARY OF STATE

APR 2 2 2013
T. HAMPTON

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: 1846 NW 56 Ave LLC (Name of Limited Liability Company)				
(Name of Limited Lia	bility Company)			
The enclosed Articles of Dissolution and fee(s) are submitted for	filing.			
Places without all companies do as a complete this matter to the fall	lavina			
Please return all correspondence concerning this matter to the fol	lowing.			
Chaus (No				
Steve Cassidy (Name of Person)				
1846 NW 56 Ave LLC (Firm/Company)				
(Firm/Company)				
5401 SW 164 Tour				
5401 SW 164 Terr (Address)				
SW Agnober FL 33331				
(Crty/State and Zip Code)				
For further information concerning this matter, please call:				
Steve Cassidy (Name of Person)	at (954) 536-61/3			
(Name of Person)	(Area Code & Daytime Telephone Number)			
Factored is a whosh for the fellowing amount.				
Enclosed is a check for the following amount: \$25.00 Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution &			
\$25.00 Fining Fee and Certificate of Dissolution	Certified Copy (additional copy is enclosed)			
MAILING ADDRESS:	STREET/COURIER ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is 1846 NW 56 Ave LLC	
2.	The Articles of Organization were filed on $\frac{4//2//2}{}$ and assigned	
	document number <u>L 10000065254</u>	
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)	
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).	·
	I'm switching my property out of the LLC to my	
	name. Dou't want the hassle of maintaining LLC	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Steve Cassidy 5401 SW 164 Terr SW Ranches, FL 33331	
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs: Steve Cassida	
	FILING FEE: \$25.00 Printed Name FILING FEE: \$25.00 Printed Name FILING FEE: \$25.00	FILED