L100006319S

(Requestor's Name)					
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(Address)					
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PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
Certified Copies	_ Certificates	of Status			
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2010 APR 18 P 2: 30

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

62 TARPON, 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:

Samuel A. Persaud, Esq.

(Name of Person)

(Firm/Company)

31 Ocean Reef Drive, Suite A-201

(Address)

Key Largo, FL 33037

(City/State and Zip Code)

For further information concerning this matter, please call:

Lissette Santiago

(Name of Person)

, 305 \ 367-3300

(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 FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is 62 TARPON, LLC					
2.	The Articles of Organizatio	n were filed on August	9, 2010	_ and assigned		
	document number L1000000	83195				
3.	The delayed effective date to (effective Note: If the date inserted in the listed as the document's effective date.	this block does not meet tl	he applicable statutory filing:	g: N/A document is received for filing) requirements, this date will not be		
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). All Members and Managers have agreed, in writing, to the termination and Dissolution of the Company, pursuant					
	An Memoers and Managers na	ive agreed, in writing, to t	ne termination and Dissolution	on of the Company, pursuant		
	to the terms of the Company's	Operating Agreement.				
				TO STATE		
5.	If there are no members, en	ter the name and addres	s of the person appointed	to wind up the company's		
6. lis	Signature of an authorized peted above to wind up the cor	person or if there are no npany's activities and a	members, the signature o	f the person appointed and		
		>		•		
<	7		C. Patrick Roberts			
_	Signature		Printed	l Name		

FILING FEE: \$25.00