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## **COVER LETTER**

TO:

Registration Section Division of Corporations

# **BUONA VITA PROPERTIES L.L.C.**

SUBJECT

(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:

Robert Ferrari				
(Name of Person)				
BUONA VITA PROPERTIES L.L.C.				
(Firm/Company)				
12934 Dresden Ct				
(Address)				
Fort Myers, FL 33912				
(City/State and Zip Code)				

For further information concerning this matter, please call:

ROBERT FERRARI

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235-2661

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

= 923.00 Tiling Fee and Cordfisms of Dissolution

Certified Copy (additional copy is enclosed)

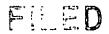
#### **MAILING ADDRESS:**

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	2019 HAR -	-6 PH 4: 19	
BUONA VITA PROPE	RTIES L.L.C.	SEG8	.531 <b>NE</b> .	
2. The Articles of Organ	ization were filed on November		SEGRE FERNIE.  FALLISTS DEEL FE  and assigned	
document number L10	0000114900			
Note: If the date insert	date the dissolution if not effect fective date cannot be prior to or more ed in this block does not meet the a seffective date on the Department of	tive on the date of filing: 3/2 than 90 days later than date document is applicable statutory filing requirement of State's records.	s received for filing) nts, this date will not b	
4. A description of occur 605,0707, Florida State	rence that resulted in the limite utes, (copy 605.0707 on back co	d liability company's dissolution over letter).	pursuant to section	
THE RENTAL PROPER	RTIE WAS SOLD ON FEB 28,201	9.		
<ol><li>If there are no member activities and affairs:</li></ol>	rs, enter the name and address o ROBERT FERRARI	of the person appointed to wind u	ip the company's	
6. Signature of an author listed above to wind up the	ized person or if there are no m ne company's activities and affa	embers, the signature of the pers	on appointed and	
11 temi		Robert Ferrari		
Signature		Printed Name		

FILING FEE: \$25.00