L110000 12527

(Requestor's Name)	
(Address)	700268721957
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	•
(Business Entity Name)	01/28/1501025019 **25.00
(Document Number)	
Certified Copies Certificates of Status	
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Tausons LER U. H. AUK

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Xanderoo Land Holdings, LLC (Name of Limited Liability Company)						
Alan Miller, M.D.						
(Name of Person)						
Xanderoo Land Holdings, LLC						
	(Firm/Company)					
	96383 Bay View Drive					
(Address) Fernandina Beach, FL 32034						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
William D. King		865	363-5464			
	(Name of Person)	at ((Area Co	de & 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	Regis Divis	EET/COURIER ADDRESS: tration Section ion of Corporations on Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Xanderoo Land Holdings, LLC					
2.	The Articles of Organization	were filed on January 28, 2011	and assigned			
	document number L11000					
3.	. The delayed effective date the dissolution if not effective on the date of filing:					
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to see 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).						
	Purpose of business complete					
5.	If there are no members, ent	er the name and address of the person appo	inted to wind up the company's			
	activities and affairs:	Alan Miller, M.D.	Σ,			
	were resoluted arrange.	96383 Bay View Drive	15 J.			
			## 28 FASS			
		Fernandina Beach, FL 32034				
6. lis	Signature of an authorized pates above to wind up the con	person or if there are no members, the signa appany's activities and affairs:	ture of the person appointed and			
			Alan Milla			
	Signature		Printed Name			

FILING FEE: \$25.00