

L110000032892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

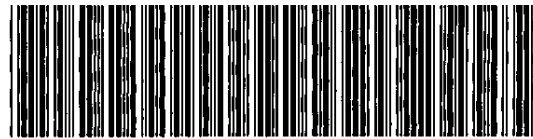
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MAY 02 2017

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ERIP ASSOCIATES, LLC (DISSOLUTION)

**DOCUMENT NUMBER:** L 11000022892

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

VICTOR S. KOSTRO, ESQ

(Name of Contact Person)

VICTOR S. KOSTRO, PA

(Firm/Company)

1508 S. HARBOR CITY BLVD.

(Address)

MELBOURNE, FLORIDA 32901

(City/State and Zip Code)

For further information concerning this matter, please call:

VICTOR S. KOSTRO

(Name of Contact Person)

at ( (321) ) - 608-4910

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Amendment 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 ERIP Associates, LLC.
2. The Articles of Organization were filed on February 22, 2011 and assigned document number L11000022892.

3. The delayed effective date the dissolution if not effective on the date of filing:  
N/A. Dissolution shall be effective upon filing.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes.

Whereas, the existing members consented to the dissolution of the LLC, by written consent.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: \_\_\_\_\_

N/A

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

  
Tom K. Davis, Managing Member

17 APR 27 PM 2:20

WRITTEN CONSENT OF MEMBERS, DIRECTORS AND OFFICERS OF  
ERIP ASSOCIATES, LLC.

THE UNDERSIGNED, the Members, directors and officers of ERIP Associates, LLC., hereby consent to the adoption of the following resolution as of the 21 day of April, 2017.


WHEREAS, the existing Members of ERIP Associates, LLC, Tom Key Davis and William Ray Davis wish to cease doing business and dissolve the entity

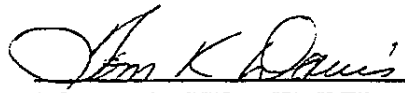
RESOLVED, that the Members hereby consent to the dissolution of ERIP Associates, LLC, a Florida limited liability company.

THE EXECUTION of this Written Consent by the undersigned Members, directors and officers of the Company waives the need for any vote, meeting, or notice of meeting in connection with the action described in the foregoing resolution. This Written Consent may be executed in any number of counterparts, all of which shall constitute but one document.

IN WITNESS WHEREOF, the undersigned Members, directors and officers of the Company have executed this Written Consent and consented to the action described in the foregoing resolution as of the date set forth above.

 4/21/17  
TOM K. DAVIS; PRESIDENT

  
WILLIAM RAY DAVIS, VICE-PRESIDENT

 4/21/17  
TOM K. DAVIS, MEMBER and  
DIRECTOR

  
WILLIAM RAY DAVIS, MEMBER  
and DIRECTOR