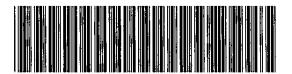
| (Re | equestor's Name) | | | | |
|---|------------------|-----------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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FILED 2016 FEB 201 P 3: 22 SECRETARY OF STATE

MAR O 2 2016 BRUCE

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: XTERRA EP 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:

RICHARD G. PARSONS

(Name of Person)

(Firm/Company)

5184 WILTON WALK DRIVE

(Address)

JACKSONVILLE, FL 32224

(City/State and Zip Code)

For further information concerning this matter, please call:

Richard G. Parsons

_{a.} 904

631-8000

(Area Code & Daytime Telephone Numb

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 XTERRA EP LLC | | | | | | |
|-----------|--|---|---|------------------------------|--|--|--|
| 2. | The Articles of Organizatio | n were filed on JU | JNE 24, 2011 | and assigned | | | |
| | document number L110000 | 73635 | | | | | |
| 3. | (effective Note: If the date inserted in the late in t | e 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) te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be led as the document's effective date on the Department of State's records. | | | | | |
| 4. | A description of occurrence 605.0707, Florida Statutes, | that resulted in the (copy 605.0707 on | e limited liability company's dis- back cover letter). | solution pursuant to section | | | |
| | SOLD THE CONDOMINIUM | 1 BUILDING UNIT. | | | | | |
| 5. | If there are no members, en activities and affairs: | ter the name and ac | idress of the person appointed to | o wind up the company's | | | |
| | | 5184 WILTON W | ALK DRIVE | FEB 2 | | | |
| | | JACKSONVILLE | E FL 32224 | P 3: 2 | | | |
| 6. lis | Signature of an authorized sted above to wind up the con | person or if there as mpany's activities a | re no members, the signature of and affairs: | the person appointed and | | | |
| | De ont | 7 | DICHADD C DADCONG | | | | |
| Signature | | RICHARD G. PARSONS Printed | Name | | | | |

FILING FEE: \$25.00