L11000051695

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Harrie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600256846266

02/18/14--01040--019 **525.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Trade Street Insurance, 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:
Suran Davies Paralegal (Name of Person)
Trade Street Residential, Inc.
19950 W Country Club D-, #800
Aventura, Florida 33180 (City/State and Zip Code)
For further information concerning this matter, please call:
Supan Davies at (786) 248-6022
(Name of Person) (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	
Irade Street	t Insurance, LLC
2. The Articles of Organization were filed document number \(\bigL\)\(\bigcup 000\)	
 A description of occurrence that resulte 605.0707, Florida Statutes, (copy 605.0 	ed in the limited liability company's dissolution pursuant to section 707 on back cover letter). OF all members to dissolve.
	·
5. If there are no members, enter the nam activities and affairs:	e and address of the person appointed to wind up the company's
6. Signature of an authorized person or is above to wind up the company's activitie	f there are no members, the signature of the person appointed and listed s and affairs:
Signature	Printed Name Greg Boumann
	FILING FEE: \$25.00