# L11 6000 9976

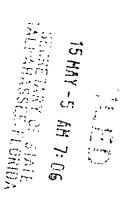
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## **COVER LETTER**

TO:

Registration Section **Division of Corporations** 

# BROOKLYNN INVESTMENT GROUP 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:

(Name of Person)
(Firm/Company)
12850 W State Road 84 lot 11/1
(Address)
DAVIE FL 33325
(City/State and Zip Code)

For further infor

Rosemary A Batzel (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 is	
	BROOKLYNN INVESTMENT	GROUP LLC	
2.	The Articles of Organization	ere filed on March 15. 2015 and assigned	
	document number L11000099	56	
3.	(effective day Note: If the date inserted in thi	dissolution if not effective on the date of filing:e cannot be prior to or more than 90 days later than date document is received for filing) block does not meet the applicable statutory filing requirements, this date will not date on the Department of State's records.	
4.	A description of occurrence the 605.0707, Florida Statutes, (co	at resulted in the limited liability company's dissolution pursuant to section 605.0707 on back cover letter).	ion
	I can,t continuing operating this	ompany, that was elected to work as a Small Corporation.	
	I'm opened other company and w	nted voluntary dissolution this company.	
5.	If there are no members, enter activities and affairs:	the name and address of the person appointed to wind up the company's cosemary A. Batzel, 12850 WEST STATE ROAD 84 11/10 Davie, FL 33325	
		TOR THE ASSET	See .
6. lis	Signature of an authorized pe sted above to wind up the comp	son or if there are no members, the signature of the person appointed and any's activities and affairs:	
,	lufediroffmel	ROSEMARY A. BATZEL	~ <sup>2</sup>
_	Signature	Printed Name	

FILING FEE: \$25.00