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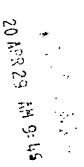
(Reque	stor's Name)	
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MAY 15 2020 C MCNAIR

COVER LETTER

COV	'ER LETTER & To		
TO: Registration Section - Division of Corporations	mited Liability Company)		
400 - 42G FIFTH AVENUE LLC	· · · · · · · · · · · · · · · · · · ·	· · ·	
SUBJECT: (Name of Lin	mited Liability Company)		
The enclosed Articles of Dissolution and fee(s) are subn	emitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
DONALD M. ALLISON, ESQUIRE			
(Name of Person)			
GRANER PLATZEK & ALLISON, P	P.A.		
(1	(Firm/Company)		
1699 SOUTH FEDERAL HIGHWAY	Y, SUITE 300		
	(Address)		
BOCA RATON, FL 33432			
(City/	/State and Zip Code)		
For further information concerning this matter, please ca	call:		
ZANDRA VANN	561 750-2445 at ()		
(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:	Street Address:		
Registration Section Division of Corporations	Registration Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	• • •	10229 F
The Articles of Organization	were filed on 10/24/2011	and assigned
document number L1100012	0943	
(effective of Note: If the date inserted in the	date cannot be prior to or more than 90 days later is block does not meet the applicable statuto	than date document is received for filing) ry filing requirements, this date will not be
A description of occurrence (605.0707, Florida Statutes, (c	that resulted in the limited liability comp.	any's dissolution pursuant to section
· 		
If there are no members, ente activities and affairs:	er the name and address of the person app N/A	pointed to wind up the company's
	•	
	 	
Signature of an authorized peove to wind up the company's	erson or if there are no members, the sign sactivities and affairs:	ature of the person appointed and listed
1 nu		
Signature	Ali Onur	Printed Name
	The Articles of Organization document number L1100012 The delayed effective date the (effective of Note: If the date inserted in the listed as the document's effect of A description of occurrence of 605.0707, Florida Statutes, (consent of all members of the consent of all me	The delayed effective date the dissolution if not effective on the date (effective date cannot be prior to or more than 90 days later. Note: If the date inserted in this block does not meet the applicable statuto listed as the document's effective date on the Department of State's records. A description of occurrence that resulted in the limited liability comp. 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). Consent of all members of the company If there are no members, enter the name and address of the person app. activities and affairs: N/A Signature of an authorized person or if there are no members, the sign ove to wind up the company's activities and affairs: Ali Onur

FILING FEE: \$25.00