L11000139793

(F	Requestor's Name)	_
. (/	Address)	_
(/	Address)	_
(1	City/State/Zip/Phone #)	_
PICK-UP	☐ WAIT ☐ MAIL	
(1	Business Entity Name)	_
(1	Oocument Number)	_
Certified Copies	Certificates of Status	_
Special Instructions	to Filing Officer:	7
1		

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April 26, 2016

KATHERINE PANTER 5850 TRINITY LANE ORLANDO, FL 32839

SUBJECT: 514 MANHATTAN DRIVE, L.L.C.

Ref. Number: L11000139793

We have received your document for 514 MANHATTAN DRIVE, L.L.C. and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Statement of Termination may be filed after the limited liability company has completed winding up and after a voluntary dissolution has been filed with this office. See section 605.0709(7), Florida Statutes for reference.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 016A00008657

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section
Division of Corporations
514
SUBJECT: MANHATTAN DELVE 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:
Please return an correspondence concerning this matter to the following.
(Name of Person)
(Name of Person)
STORGRATER CONTROLLE
(Firm/Company)
58SD TRINITY LA
(Address)
DELANDY PL 32839
(City/State and Zip Code)
· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, please call:
For future anomation concerning this matter, please can.
KATHERINE PANJER at (321) 438-4241
(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
	514 MANHATTAN DEIVE LLC
2.	The Articles of Organization were filed on 12 12 201, and assigned
	document number <u>L11000139793</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 4130 htc (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	SOLD ASSETS
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: KATTELINE PAUTER
	SBSD TRINITY LN
	OLLANDO, FL 32839
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ed above to wind up the company's activities and affairs:
1	Athorne KATHORNE H PAUTE Signature Printed Name
1	FILING FEE: \$25.00
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	STATI ORIT