

L12 0000 40697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

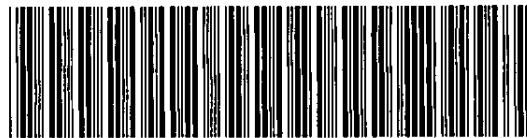
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/03/14--01001--013 **55.00

RECORDED
OFFICE OF STATE
SECRETARY
2014 SEP -2 PM 4:32
TO: FILING OFFICER
SU: FILING OFFICER

SEP -2 2014
T CLINE

FILED
2014 SEP -2 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET

ACCT. #FCA-23

CONTACT: SAVANNAH DEBOER

DATE: 09/02/2014

REF. #: 6592877.9263056

CORP. NAME: TURNBERRY LINCOLN VILLAGE LLC

- ARTICLES OF INCORPORATION ARTICLES OF AMENDMENT ARTICLES OF DISSOLUTION
- ANNUAL REPORT TRADEMARK/SERVICE MARK FICTITIOUS NAME
- FOREIGN QUALIFICATION LIMITED PARTNERSHIP LIMITED LIABILITY
- REINSTATEMENT MERGER WITHDRAWAL
- CERTIFICATE OF CANCELLATION
- OTHER:

STATE FEES PREPAID WITH CHECK # 70026599 FOR \$ 65.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$ _____

PLEASE RETURN:

CERTIFIED COPY

- CERTIFICATE OF GOOD STANDING
 PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

Examiner's Initials

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 SEP -2 PM 01 57

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
TURNBERRY LINCOLN VILLAGE LLC

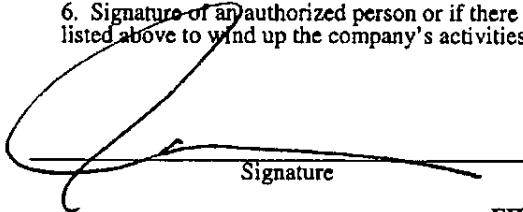
2. The Articles of Organization were filed on 03/22/2012 and assigned
document number L12000040697

3. The delayed effective date the dissolution if not effective on the date of filing: 09/02/2014
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
We never went forward with the project that the entity was created to own.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Jeffrey Soffer
19950 West Country Club Drive, 10th Floor, Aventura, FL 33180

6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:


Signature

Jeffrey Soffer
Printed Name

FILING FEE: \$25.00

2014 SEP -2 AM 9 57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: TURNBERRY LINCOLN VILLAGE LLC

Document number of Limited Liability Company is: L12000040697

Date of dissolution was: 09/02/2014

Description of information that must be included in a written claim:

Name of Contractor, date and scope of work, and amount of claim. Contact information, including e-mail address, and telephone number for Claimant.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

19950 W. Country Club Dr., 10th Floor, Aventura FL 33180

Attn: Turnberry Lincoln Village LLC, c/o Turnberry Associates

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TALLAHASSEE, FLORIDA

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A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.



Printed Name of the Person Filing

Jeffrey Soffer

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00