

Jan. 19, 2022 11:40AM
1/19/22, 11:34 AM

GRAY ROBINSON

Division of Corporations

No. 2907 P. 1

L12000075927

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : I20010000078
Phone : (407)843-8880
Fax Number : (407)244-5690

LLC DISSOLUTION OR WITHDRAWAL

3290 N. NARCOOSSEE RD. FL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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T. LEMIEUX
JAN 20 2022

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3290 N. NARCOOSSEE RD. FL, 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:

Tucker Thoni

(Name of Person)

GrayRobinson, P.A.

(Firm/Company)

301 E. Pine Street, Suite #1400

(Address)

Orlando, FL 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Tucker Thoni, Esq.

(Name of Person)

at 407 843-8880
(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of a limited liability company is
3290 N. NARCOOSSEE RD. FL, LLC
2. The Articles of Organization were filed on 06/06/2012 and assigned
document number L12000075927
3. The delayed effective date the dissolution if not effective on the date of filing:
(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
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Written consent resolution signed by all the Members and Board of Managers authorizing the dissolution.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

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

Terry Presley

Printed Name

FILING FEE: \$25.00

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