

L12 0000 96428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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15 FEB 26 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J Shivers MAR 09 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JSN FL HOTELS, 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:

Parul Patel

(Name of Person)

(Firm/Company)

11405 Malaga Sky Place

(Address)

Temple Terrace, FL 33637

(City/State and Zip Code)

For further information concerning this matter, please call:

Mayur Patel

(Name of Person)

904

at ()

5844340

(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
JSN FL HOTELS, LLC
2. The Articles of Organization were filed on 07/26/2012 and assigned
document number L12000096428
3. The delayed effective date the dissolution if not effective on the date of filing: 03/01/2015
(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).
Business will not be continuing.
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Mayur Patel
11405 Malaga Sky Place
Temple Terrace, FL 33637
6. Signature of an authorized person or if there are no members, the signature of the person appointed
listed above to wind up the company's activities and affairs:



Signature

Parul Patel

Printed Name

FILING FEE: \$25.00

FILED
15 FEB 26 PM 10:59
CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF DADE
FLORIDA