212000/11918

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COVER LETTER

	istration Section ision of Corporations				
SUBJECT:	1409 Epic, LLC				
SUBJECT;	(Name of Limit	ed Liability Company)			
The enclosed	Articles of Dissolution and fee(s) are submit	ted for filing.			
Please return	all correspondence concerning this matter to	the following:			
	Gerald Duty				
	(Nar	ne of Person)			
	Duty, PL				
	(Fir	m/Company)			
	260 Crandon Blvd, Ste 32-252				
	(Address)			
	Key Biscayne, Florida 33149				
	(City/Sta	te and Zip Code)			
For further ir	nformation concerning this matter, please call:				
Gerald Duty		305 491-5111			
	(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/COURIER ADDRESS:			
	Registration Section Division of Corporations	Registration Section Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability company is 1409 Epic, LLC				············
The Articles of Organization were filed on Aug	gust 30, 2012	and assigned	i	
document number L12000111918				
The delayed effective date the dissolution if no (effective date cannot be prior to	t effective on the date of or more than 90 days later tha	filing: upon filing and date document is received	ved for filing	g)
A description of occurrence that resulted in the 605.0707, Florida Statutes, (copy 605.0707 on b	limited liability compar back cover letter).	ny's dissolution purs	uant to sec	ction
Sale of sole asset held.			ALC:	7
			N 0 2	ΛPR
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	<u></u>			<u> </u>
			RA :	ָת ת
If there are no members, enter the name and add activities and affairs:	dress of the person appo	inted to wind up the	company'	's
				-
				
Signature of an authorized person or if there are ted above to wind up the company's activities ar	no members, the signat and affairs:	ure of the person ap	pointed an	nd
MI	Cera	ld Outy		<u></u>
✓ Signature	P	rinted Name		

FILING FEE: \$25.00