

(Re	questor's Name)	
(Ad	dress)	<del> </del>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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11/28/16--01014--029 \*\*30.00

FILED

SECRETARY OF STATE
SECRETARY OF STATE
ANALYSIEF, FLORIDA

D. SCOTT

DEC 9 2016



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 29, 2016

MARVIN SMITH 7 RIVER POINT WAY PALM COAST, FL 32137

SUBJECT: EMERSON BENTLEY, L.L.C

Ref. Number: L12000118246

We have received your document for EMERSON BENTLEY, L.L.C and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE PROVIDE WRITTEN CLAIM.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 716A00025385

filed attached in error.

No Claims

TUST Close This C.

Mari-Smith

386-783-0888

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Closing Co DOCUMENT NUMBER: 17	MPANY / DISSOLUTION 000118 246
The enclosed Notice of Limited Liability C	Company Dissolution and fee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
MARVIN	Smith Contact Person)
(Name of C	Contact Person)
EMERSE	ON BENTLEY LLC (Company)
(7 m	Company
/ Rive	R POINTWAY
PAIM COA	dress) 4ST, FL, 32137
(City/State	e and Zip Code)
For further information concerning this matt	
MARVIN Smith	at (386) 283-0888 (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount	
□\$25 Filing Fee  \$30 Filing Fee & Certificate of Status	Certified Copy  (Additional copy is enclosed)  Certified Copy  (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

## Notice of Limited Liability Company Dissolution

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: EMERSON BENILEY, LLC
Document number of Limited Liability Company is: L12000 118 246
Date of dissolution was: $1/-28-20/6$
Description of information that must be included in a written claim:
NONE
4 Filed IN ERROR - NO CHAIMS
Filed IN ERROR - NO CLAIMS JUST Close This ConfANY
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
PAIM COAST, FL 3225
PAIM COAST, FL 32233
SSET OF THE
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.
MARVIN Smith Ward built
Printed Name of the Person Filing Signature of the Person Filing