

L13000031767

(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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2014 JAN 16 PM 3:18
CLERK OF STATE
TALLAHASSEE FLORIDA

JAN 22 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Centrum-Lauderdale by the Sea 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:

Amy Horan

(Name of Person)

Centrum Partners LLC

(Firm/Company)

225 W. Hubbard, 4th Floor

(Address)

Chicago, IL 60654

(City/State and Zip Code)

For further information concerning this matter, please call:

Amy Horan

(Name of Person)

at (312) 279-1382

(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

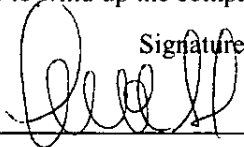
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DIVISION OF CORPORATIONS

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

1. The name of a limited liability company is
Centrum-Lauderdale by the Sea LLC
2. The Articles of Organization were filed on March 1, 2013 and assigned
document number L13000031767
3. The delayed effective date the dissolution if not effective on the date of filing: Date of 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).
Entity was formed to purchase property but the property was never purchased

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Arthur Slaven, Manager
967 Hillsboro Mile
Hillsboro Beach, FL 33062

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


Printed Name

Arthur Slaven

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FILING FEE: \$25.00