

L130000053106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

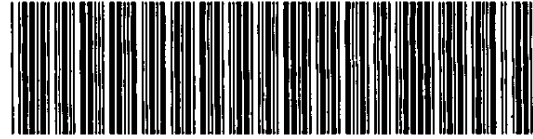
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FEB 22 2017  
S. YOUNG

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TALLAHASSEE, FLORIDA  
17 FEB -6 AM 11:35



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 7, 2017

MARY LOU RODON, ESQ  
RODON LAW, PLLC  
201 ALHAMBRA CIRCLE STE 504  
CORAL GABLES, FL 33134

RODON LAW, PLLC  
FEB 14 2017  
RECEIVED *SR*

SUBJECT: 19111 FISHER ISLAND, LLC  
Ref. Number: L13000053106

We have received your document for 19111 FISHER ISLAND, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document. *DONE 2/14/17*

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 917A00002444

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2017 FEB 21 PM 3:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 19111 Fisher Island, 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:

Mary Lou Rodon, Esq.  
(Name of Person)  
Rodon Law, PLLC  
(Firm/Company)  
201 Alhambra Circle, Suite 504  
(Address)  
Coral Gables, Florida 33134  
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA  
17 FEB -6 AM 11:35

For further information concerning this matter, please call:

Mary Lou Rodon, Esq. at ( 305 ) 445-8881  
(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:**  
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

19111 Fisher Island, LLC

2. The Articles of Organization were filed on April 11, 2013 and assigned

document number L13000053106

3. The delayed effective date the dissolution if not effective on the date of filing: n/a  
(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).

property sold, no remaining assets or business

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

activities and affairs: Mary Lou Rodon

Manager

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

Mary Lou Rodon

Printed Name

**FILING FEE: \$25.00**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 FEB -6 3:11:35

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

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: 19111 Fisher Island, LLC

Document number of Limited Liability Company is: April 11, 2013

Date of dissolution was: Effective upon filing

Description of information that must be included in a written claim:

Name of claimant, address and telephone number

Description of the nature of the claim

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

19111 Fisher Island, LLC

c/o Rodon Law, PLLC

201 Alhambra Circle, Suite 504

Coral Gables, Florida 33134

Tel: (305) 445-8881

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.

Mary Lou Rodon, Manager

Printed Name of the Person Filing

  
Signature of the Person Filing

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

17 FEB - 6 AM 11: 35