

L13000070410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

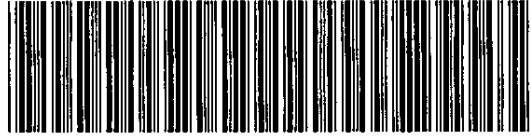
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

AUG 03 2015
Y SULKER



KELTON & TEAL, LLC

attorneys and counselors at law
July 28, 2015

Florida Department of State
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee FL 32314

Re: Airport Plus, L.L.C.

Enclosed is Cover Letter, Articles of Dissolution for a Limited Liability Company, together with check #3808, in the amount of \$25.00 covering the Filing Fee.

Thank you for your assistance in this matter.

Very truly yours,

A handwritten signature in black ink, appearing to read 'M. S. Teal'.

Michael S. Teal
MST/nae
Enc.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Airport Plus, L.L.C.
(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:

Michael S. Teal
(Name of Person)

Kelton and Teal, L.L.C.
(Firm/Company)

333 East New York Avenue, Suite A
(Address)

DeLand FL 32724
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael S. Teal at (386) 738-3400
(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

AIRPORT PLUS, L.L.C.

2. The Articles of Organization were filed on May 13, 2013 and assigned

document number L13000070410

3. The delayed effective date the dissolution if not effective on the date of filing: 8-3-15
(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).

Members have disposed of their business and entered into a new venture

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

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

Raymond S. Pollitt
Printed Name

FILING FEE: \$25.00

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15 JUL 30 PM 1:44
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA