

L17000072520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

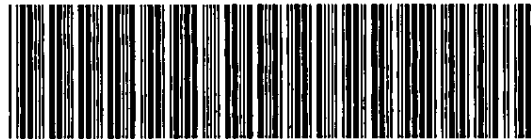
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/10/16--01025--019 \*\*55.00

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16 MAR 10 AM 8:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 11 2016

J SHIVERS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MILLERS 621, 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:

GAIL E. STEVENS

(Name of Person)

GAIL E. STEVENS, P.A.

(Firm/Company)

412 N.E. 4TH STREET

(Address)

FT. LAUDERDALE, FLORIDA 33301

(City/State and Zip Code)

For further information concerning this matter, please call:

GAIL E. STEVENS

(Name of Person)

at ( 954 ) 463-5266 X101

(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

MILLERS 621, LLC

2. The Articles of Organization were filed on MAY 16, 2013 and assigned

document number L13000072520

3. The delayed effective date the dissolution if not effective on the date of filing: APRIL 16, 2016

(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).

Sale of premises owned by LLC; payment of costs, liens and expenses related thereto; disbursement of proceeds

to all members specified in the Operating Agreement; consent of members to dissolve attached hereto and

incorporated herein; Appointment of Manager BONNY M. COLE as liquidator to wind up business;

all known creditors have been paid

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

BONNY M. COLE

Printed Name

FILING FEE: \$25.00

FILED  
16 MAR 10 AM 8:29  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## 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: MILLERS 621, LLC

Document number of Limited Liability Company is: L13000072520

Date of dissolution was: APRIL 16, 2016

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

Name, address, phone, email of claimant; claim amount, basis of claim  
and supporting documentation

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

1885 N.E. 15th Avenue  
Fort Lauderdale, Florida 33305

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.

BONNY M. COLE

Printed Name of the Person Filing

Bonny M. Cole  
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00