# L13000088963

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	–
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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### **COVER LETTER**

TO: Registration Section **Division of Corporations** 

Lofton Island Developments GP 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:

Patrick H. Willis			
(Name of Person)	_		
Willis & Oden, PL			
(Firm/Company)			
2121 S. Hiawassee Road, Suite 116			
(Address)	_		
Orlando, FL 32835	3000 2000 2000	2018 AUG 3	77
(City/State and Zip Code)	到	S SU	
For further information concerning this matter, please call:	SSEE F	31 PM	
Patrick H. Willis 407 903-9939	NO7.	جي	The second
(Name of Person) (Area Code & Daytime Telephone No	an jeff '	-33	
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

Section 18

1.	The name of a limited liability company is  Lofton Island Developments GP LLC		
2.	The Articles of Organization were filed on June 20, 2013 and assigned		
	document number L13000088963		
3.	The delayed effective date the dissolution if not effective on the date of filing:  (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 no listed as the document's effective date on the Department of State's records.	ot be	
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to secti 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	on	
	Written Consent of all Members.		
	ALLXHAS	2018 AUG 3 I	9 1 227
5.	If there are no members, enter the name and address of the person appointed to wind up the company's	PB	
	activities and affairs:	9: 5%	1
_			
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:		
	George Armoyan		
	Signature Printed Name		

**FILING FEE: \$25.00** 

## 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: Lofton Island Developments GP LLC	
Document number of Limited Liability Company is: L13000088963	
Date of dissolution was:	
Description of information that must be included in a written claim:	
A detailed written description of the basis for the claim, including all relevant dates,	
contracts and all other back up documentation as well as an itemization of the dollar	
amount of the claim.	
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Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
3040 Oasis Grand Blvd	
3rd Floor Management Office	
Fort Myers, FL 33916	
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.	
George Armoyan	
Printed Name of the Person Filing Signature of the Person Filing	

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