

L13000113774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

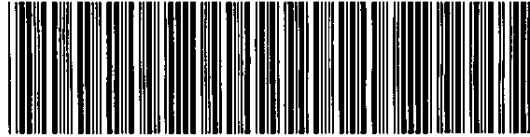
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600273598546

06/05/15--01011--007 **25.00

FILED

2015 JUL -2 P 3:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 06 2015

3:48 PM



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 8, 2015

MATTHEW J. KAHN
MATTHEW J. KAHN, PA
7450 GRIFFIN RD STE 120
DAVIE, FL 33314

SUBJECT: CARLYLE HOUSE 210, LLC.
Ref. Number: L13000113774

We have received your document for CARLYLE HOUSE 210, 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):

The attached form must be completed in order to file the document.

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.

Deborah Bruce
Regulatory Specialist II

Letter Number: 215A00011944

2015 JUL - 2 P 3:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DISSOLUTION OF CARLYLE HOUSE 210 LLC

DOCUMENT NUMBER: L13000113774

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MATTHEW J. KAHN

(Name of Contact Person)

MATTHEW J. KAHN, PA

(Firm/Company)

7450 GRIFFIN RD STE 120

(Address)

DAVIE, FL 33314

(City/State and Zip Code)

For further information concerning this matter, please call:

MATTHEW KAHN

(Name of Contact Person)

at (**954**) **851-9996**

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment 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
CARLYE HOUSE 210, LLC

2. The Articles of Organization were filed on 08/12/2013 and assigned
document number L13000113774

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 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).
THE ENTITY HAS HAD NO ACTIVITY SINCE THE FORMATION IN 2013. THEREFORE THE
MANAGING MEMBER HAS DECIEDED TO DISSOLVE THE ENTITY

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:

Alex Brunello
Signature

ALEX BRUNELLO

Printed Name

FILING FEE: \$25.00

2015 JUL - 2 P 3:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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: CARLYLE HOUSE 210, LLC

Document number of Limited Liability Company is: L13000113774

Date of dissolution was: 12/31/2014

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

NAME, ADDRESS, TYPE OF CLAIM, AMOUNT OF CLAIM,
DATE OF CLAIM AND PROOF OF CLAIM.

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

C/O MATTHEW J. KAHN, PA
7450 GRIFFIN RD STE 120
DAVIE, FL 33314

2015 JUL -2 P 3:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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.

ALEX BRUNELLO

Printed Name of the Person Filing

Alex J. K. Brunello

Signature of the Person Filing