L13000136370

| (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: | | | | |
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

| ACCOUNT | NO. | : | I20000000195 |
|---------|-----|---|--------------|
| | | | |

REFERENCE: 195479 5021731

AUTHORIZATION : Smell & Comments

COST LIMIT : \$\frac{1}{2} \frac{1}{2} \cdot 0.00

ORDER DATE: June 28, 2016

ORDER TIME : 12:59 PM

ORDER NO. : 195479-005

CUSTOMER NO: 5021731

DOMESTIC FILINGS

NAME: 916 EAST BLVD, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER'S INITIALS:

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. The name of a limited liabi 916 EAST BLVD, LLC | lity company is | · | | |
|--|---|--|--|--|
| 2. The Articles of Organization | on were filed on | SEPTEMBER 26, 2013 and assigned | | |
| document number L130001 | 36370 | | | |
| (effective | e date cannot be prior this block does not | not effective on the date of filing: to or more than 90 days later than date document is received for filing) meet the applicable statutory filing requirements, this date will not lepartment of State's records. | | |
| 4. A description of occurrence 605.0707, Florida Statutes, | that resulted in to | the limited liability company's dissolution pursuant to section back cover letter). | | |
| The Company was sold and is | no longer doing bu | usiness. | | |
| | | | | |
| | | | | |
| | | | | |
| 5. If there are no members, enter the name and activities and affairs: Mark W. Kessle | | address of the person appointed to wind up the company's | | |
| | 4901 Vineland Rd., Suite 650 | | | |
| | Orlando, FL 32811 | | | |
| Signature of an authorized plisted above to wind up the cor | person or if there npany's activities | are no members, the signature of the person appointed and s and affairs: | | |
| MW W W | | Mark W. Kessler, Authorized Person | | |
| Signature | | Printed Name | | |

FILING FEE: \$25.00

TILED