L13000/40832

(Red	questor's Name)	· · · · · · · · · · · · · · · · · · ·			
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(City/State/Zip/Phone #)					
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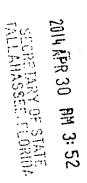
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COVER LETTER

(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: William R. Cross (Name of Person) (Firm/Company) 4360 SW 20th Place (Address) (Cape Coral, FL 33914 (City/State and Zip Code) For further information concerning this matter, please call: William R. Cross 239 549-7918	
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(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 Downtown Boomtwon LLC			
2.	The Articles of Organization were filed on Octo	ber 4, 2013	and assigned	
	document number L13000140832			
3.	The delayed effective date the dissolution if not e (effective date cannot be prior to or	effective on the date of filing more than 90 days later than date of	May 1, 2014	Ī
4.	A description of occurrence that resulted in the li 605.0707, Florida Statutes, (copy 605.0707 on bac	mited liability company's di ck cover letter).	ssolution pursuant to sec	tion
	Members mutually agreed to not to pursu	e establishing the busin	ess.	
			TYT.	2014
			20 20 20 20	2014 KPR 3
		<u>· </u>	(A)	30 平
5.	If there are no members, enter the name and address activities and affairs:	ess of the person appointed t	to wind up the company	j)
				_
				_
				_
6. Iis	Signature of an authorized person or if there are rested above to wind up the company's activities and	no members, the signature of affairs:	the person appointed and	d
/		William R. Cross		
_	Maignature Signature	Printed	Name	-

FILING FEE: \$25.00