

L13000151439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

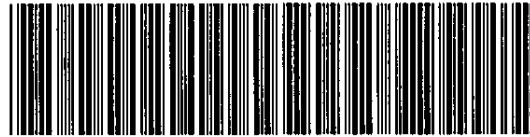
(Business Entity Name)

(Document Number)

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

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Office Use Only



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02/26/14--01004--004 \*\*25.00

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2014 FEB 26 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 27 2013

T. HAMPTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NUD SUPERIOR MANOR, 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:

Oliver L. Gross

(Name of Person)

New Urban Development

(Firm/Company)

8500 NW 25th Street

(Address)

Miami, FL 33147

(City/State and Zip Code)

For further information concerning this matter, please call:

Oliver L. Gross

(Name of Person)

at 305 696-4450

(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

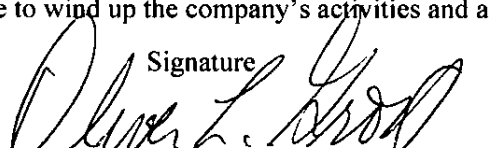
**STREET/COURIER ADDRESS:**

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  
NUD SUPERIOR MANOR, LLC
2. The Articles of Organization were filed on 10/28/13 and assigned  
document number L13000151439
3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_
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).  
Consent of all members)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Oliver L. Gross  
8500 NW 25th Street  
Miami, FL 33147  
\_\_\_\_\_
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

  
\_\_\_\_\_

Printed Name

Oliver L. Gross

**FILING FEE: \$25.00**

**FILED**  
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