

L13 000 15 1463

(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



700250550167

02/26/14--01004--002 **25.00

RECEIVED
TALLAHASSEE, FLORIDA

2014 FEB 26 PM 1:48

FILED

FEB 27 2014

T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NUD WARD TOWERS, 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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 FEB 26 PM 1:48

FILED

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

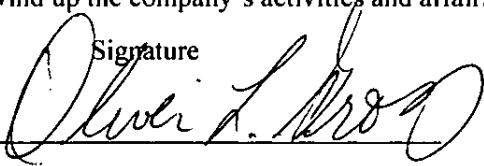
**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
NUD WARD TOWERS, LLC
2. The Articles of Organization were filed on 10/28/13 and assigned
document number L13000151463
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
2014 FEB 26 PM 4:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA