

L14000000950Y

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

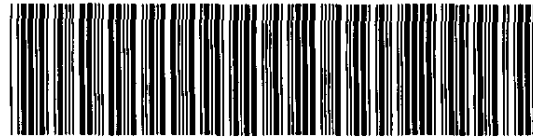
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
DIVISION OF REVENUE
15 MAR 23 AM 10:58
NO RECEIPT
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
15 MAR 23 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 24 2015
T. HAMPTON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 558323 4301677

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : March 20, 2015

ORDER TIME : 9:20 AM

ORDER NO. : 558323-005

CUSTOMER NO: 4301677

DOMESTIC FILINGS

NAME: LDV MET SQUARE 2 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: Courtney Williams - EXT# 62935

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LDV MET SQUARE 2 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:

Lawrence B. Simon, Esq.

(Name of Person)

c/o Morrison Cohen LLP

(Firm/Company)

909 Third Avenue

(Address)

New York, New York 10022

(City/State and Zip Code)

For further information concerning this matter, please call:

Lawrence B. Simon

(Name of Person)

at (212) 735-8608

(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

LDV MET SQUARE 2 LLC

2. The Articles of Organization were filed on 01/16/2014 and assigned

document number L14000009504

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)

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 company is not transacting business for which it was formed.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: John Meadow

c/o LDV Hospitality Holdings, LLC

450 Seventh Ave - Suite 4200

New York, NY 10123

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

John Meadow

Printed Name

FILING FEE: \$25.00

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