

L14000020471

(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



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01/09/18--01025--009 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JAN -9 PM 2:54

K. SALY
JAN 10 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 385 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:

BRUCE F. IDEN
(Name of Person)

IDEN LAW OFFICES
(Firm/Company)

14601 SW 29th Street Suite 110
(Address)

MIRAMON, Florida 33027
(City/State and Zip Code)

For further information concerning this matter, please call:

BRUCE IDEN at (954) 885-0085
(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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JAN - 9 PM 2:54

1. The name of a limited liability company is

385 LLC

2. The Articles of Organization were filed on _____ and assigned

document number L14000020471

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2017
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

ceased all business activities
and all members consented to dissolution

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

P.O. Box 260310
Pembroke Pines, Florida
33026
attn: Michelle Joseph

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:

Michelle Joseph
Signature

Michelle M. Joseph
Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JAN - 9 PM 2:54

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: 385 LLC

Document number of Limited Liability Company is: L14000020471

Date of dissolution was: 12/31/2017

Description of information that must be included in a written claim:

Nature of claim, amount owed,
back up documentation

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

P.O. Box 260310
Pembroke Pines, Florida
33026
attn: Michelle Joseph

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Michelle M. Joseph
Printed Name of the Person Filing

Michelle M. Joseph
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00