

L15000027746

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

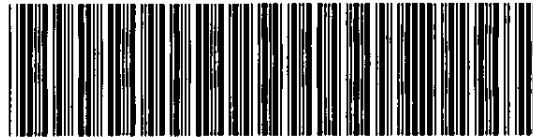
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

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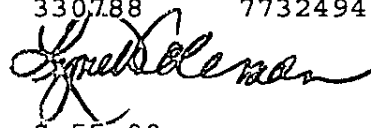
900290988619

FILED  
2016 OCT 14 AM 8:37  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
DEPARTMENT OF STATE  
16 OCT 14 PM 2:00

K. SALY  
OCT 17 2016

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

ACCOUNT NO. : I20000000195  
REFERENCE : 330788 7732494  
AUTHORIZATION :   
COST LIMIT : \$ 55.00

ORDER DATE : October 14, 2016  
ORDER TIME : 1:03 PM  
ORDER NO. : 330788-005  
CUSTOMER NO: 7732494

DOMESTIC FILINGS

NAME: AREAS EMMITT SMITH JV, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       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: Areas Emmitt Smith JV, 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:

Claudia Oliva

(Name of Person)

Areas Emmitt Smith JV, LLC

(Firm/Company)

5301 Blue Lagoon, Suite 609

(Address)

Miami, FL 33126

(City/State and Zip Code)

For further information concerning this matter, please call:

Claudia Oliva

(Name of Person)

at ( 305 ) 267-8510

(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**  
2016 OCT 14 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Areas Emmitt Smith JV, LLC

2. The Articles of Organization were filed on 02/13/2015 and assigned

document number L15000027746

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)

**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).

Dissolution pursuant to the terms of the operating agreement

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

Kirk Weiss

5301 Blue Lagoon Dr Ste. 690

Miami, FL 33126

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

Kirk Weiss

Printed Name

**FILING FEE: \$25.00**