# L15000051552

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SECRETARY OF STATE
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DEPARTMENT OF STATE

17 MAR 20 PH 4: 24

D. SCOTT MAR 2 1 2017 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 562415 7475225

AUTHORIZATION :

COST LIMIT : 4 25.00

ORDER DATE: March 20, 2017

ORDER TIME : 3:40 PM

ORDER NO. : 562415-010

CUSTOMER NO: 7475225

#### DOMESTIC FILINGS

NAME: HSHR MANAGER, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER'S INITIALS:

17 MAR 20 AM 8: 34
SECRETARY OF STATE
FOR THE PROPERTY OF STATE
TO REPORT OF THE PROPERTY OF T

## **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: HSHR Manager, 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:

Julie Levitt			
0	Name of Person)		_
Gencom			
. ()	Firm/Company)		
2700 Tigertail Ave	enue		
(Address)			7 S
Coconut Grove F	L 33133		三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三
(City/	(State and Zip Code)		一競烈
For further information concerning this matter, please ca	all:		E.F.C.
Julie Levitt	at (305	442-9808	3 3 3 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
(Name of Person)	(Area Cod	le & Daytime Telephone Nun	nber)

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

l.	The name of a limited liability company is	S		
	HSHR Manager, LLC			
2.	The Articles of Organization were filed or	n 05/07/2015 and assigned		
	document number L15000081552			
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 i 605.0707, Florida Statutes, (copy 605.070	in the limited liability company's dissolution pursuant to section 7 on back cover letter).		
	Cease doing business			
	.,			
5.	If there are no members, enter the name are activities and affairs:	nd address of the person appointed to wind up the company		
		20 AH 8- ARY DE STA		
6. Iis	Signature of an authorized person or if the ted above to wind up the company's activities.	ere are no members, the signature of the person appointed and ties and affairs:		
	Julia W. Levätt Signature	Julie M. Levitt Printed Name		

FILING FEE: \$25.00