

L15000.116287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

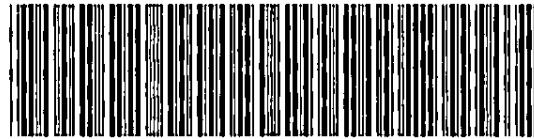
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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JUN 09 2020

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: 9105 Corsea del Fontana Way, 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:

Christopher A. Roche  
Name of Person

Firm/Company

229 N. Collier Boulevard  
Address

Marco Island, FL 34145  
City/State and Zip Code

For further information concerning this matter, please call:

Christopher A. Roche at ( 239 ) 389-0700  
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)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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

1. The name of a limited liability company is 9105 Corsea del Fontana Way, LLC.
2. The Articles of Organization were filed on July 6, 2015, and assigned document number L15000116287.
3. The delayed effective date the dissolution if not effective 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 record.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to Section 605.0707, Florida Statutes:

Pursuant to Section 605.0707(2) Florida Statutes the company has been dissolved at the direction of and with the consent of all the members.

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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6. Signature of 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

C. Roche

Christopher A. Roche

**FILING FEE: \$25.00**

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NOTICE OF LIMITED LIABILITY COMPANY DISSOLUTION

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company names below for resolution of payment of unknown claims against this limited liability company as provided in s.65.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional when filing a voluntary dissolution.

Name of Limited Liability Company: 9105 Corsea del Fontana Way, LLC

Document number of limited liability Company is: L14000049316

Date of dissolution was: Upon filing

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

Person or entity making the claim.

Nature of the claim.

Monetary amount of the claim.

Telephone number, email address and mailing address of the claimant

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

Attn: Christopher A. Roche

229 N. Collier Boulevard

Marco Island, FL 34145

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

Christopher A. Roche  
Printed Name of the Person Filing

C. Roche  
Signature of the Person Filing

**Fee: No charge if included with Article of Dissolution. If file separately \$25.00**

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