

4500017743

(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



900279063629

900279063629  
11/20/15--01008--008 \*\*25.00

FILED  
15 NOV 20 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
NOV 23 2015  
S. YOUNG

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TAM TRAN PROPERTIES 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:

TAMT TRAN  
(Name of Person)

TAM TRAN PROPERTIES LLC  
(Firm/Company)

P.O. BOX 612103  
(Address)

SAN JOSE, CA 95161-2103  
(City/State and Zip Code)

For further information concerning this matter, please call:

TAMT TRAN  
(Name of Person)

at ( 408 ) 426 0959  
(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

FILED  
15 NOV 20 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

1. The name of a limited liability company is

TAM TRAN PROPERTIES LLC

2. The Articles of Organization were filed on 07/08/2015 and assigned

document number L15000117743

3. The delayed effective date the dissolution if not effective on the date of filing: 11/16/2015  
(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).

I CHANGED MY MIND AFTER CONSULTING WITH MY  
ATTORNEY AND DECIDED TO PUT THE PROPERTIES  
IN MY OWN NAME INSTEAD OF IN THE LLC

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

TAMI TRAN

P.O. BOX 612103

SAN JOSE, CA 95161-2103

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

TAM T TRAN

Printed Name

**FILING FEE: \$25.00**

FILED  
NOV 20 2015  
STATE OF FLORIDA  
CLERK OF THE COURT