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SECRETARY OF STATE
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MAR 25 2016 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 405 SAND FIRES LLC (Name of Limited Liability Company)
(Name of Entitled Enabling Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARIA AIVAREZ (Name of Person)
405 SANDFINES LLC (Firm/Company)
79 SW 12 ST UNIT 1412 (Address)
Miam; FL 33/30 (City/State and Zin Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
MARIA AIVAREZ at (305) 775-3478 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytine Perpione Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee and Certificate of Dissolution \$\sim \\$55.00 \text{ 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

1. The name of a limited liab	
	405 SANDFIRES LLC
2. The Articles of Organizat	ion were filed on $\frac{7/08/20/5}{}$ and assigned
document number	15000117937
Note: If the date inserted in	the dissolution if not effective on the date of filing: MALCH 30, 2016 we date cannot be prior to or more than 90 days later than date document is received for filing) in this block does not meet the applicable statutory filing requirements, this date will not fective date on the Department of State's records.
605.0707, Florida Statutes	ce that resulted in the limited liability company's dissolution pursuant to section, (copy 605.0707 on back cover letter).
THE PROPERTY	405 ADAMS AVE. UNIT 11 CAPE CANAJERAL
	SEPTEMBER 2015.
5. If there are no members, e activities and affairs:	enter the name and address of the person appointed to wind up the company's MARIA AVAREZ
	79 SW 12 ST
	Unit 1412
	Miani FL 33130
6. Signature of an authorized listed above to wind up the c	d person or if there are no members, the signature of the person appointed and company's activities and affairs:
Maria Tal.	MARIA ALVAREZ
(Signature	FILING FEE: \$25.00
	FILING FEE: \$25.00
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