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☐ PICK-UP	☐ WAIT	MAIL	
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Certified Copies	_ Certificates	of Status	
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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: ASPEN STORAGE 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:

Robert Lomas
(Name of Person)
(Firm/Company)
1000 N. US Highway 1 Unit BA 301
(Address)
Jupiter, FL 33477
(City/State and Zin Code)

For further information concerning this matter, please call:

Robert Lomas

216 496-4306

(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)

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

DIVISION OF CORFORA

1. The name of a limited liab ASPEN STORAGE LLC	ility company is	18 JAN 16 AM 11:
ASI EN STORAGE ESC		<u> </u>
2. The Articles of Organizati	on were filed on	and assigned
document number L15000	160257	
(effective Note: If the date inserted in	the dissolution if not effective on e date cannot be prior to or more than 90 this block does not meet the applicab ctive date on the Department of State	days later than date document is received for filing) le statutory filing requirements, this date will not be
4. A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limited liabil (copy 605.0707 on back cover let	ity company's dissolution pursuant to section ter).
The majority of the LLC mer	abers voted to dissolve the LLC.	,
5. If there are no members, e activities and affairs:	nter the name and address of the pe Robert Lomas	erson appointed to wind up the company's
	1000 N. US Highway 1 Unit BA 301	
	Jupiter, FL 33477	
 Signature of an authorized listed above to wind up the co 	person or if there are no members mpany's activities and affairs:	, the signature of the person appointed and
70 JL		
Signature	Robert	Printed Name
Signature		i ilineu ivaine

FILING FEE: \$25.00