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(Requestor's Name)				
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## **COVER LETTER**

TO:

Registration Section

Divi	sion of Corporations				
SUBJECT:	301 CENTER LLC				
(Name of Limited Liability Company)					
The enclosed	Articles of Dissolution and fee(s) are submitt	ted for filing.			
Please return	all correspondence concerning this matter to	the following:			
	RICARDO HALFEN				
	(Name of Person)				
	301 CENTER LLC				
	(Firm/Company)				
	18200 NE 19TH AVE. STE. 101				
	(Address)				
	NORTH MIAMI BEACH, FL 33162				
	(City/Sta	te and Zip Code)			
For further in	formation concerning this matter, please call:				
RICARDO HALFEN		305 at (	305-851-2130 )		
(Name of Person) (Area Code & Daytime Telephone N		de & Daytime Telephone Number)			
Enclosed is a c	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)			
	ling Address:	Street Address			
Registration Section		Registration Section			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability compa 301 CENTER LLC	ny is	2020 F.ED 10 PH 12: 53
2. The Articles of Organization were file	ed on <u>04/12/2016</u>	and assigned
document number L16000072037		
3. The delayed effective date the dissolu (effective date cannot Note: If the date inserted in this block d listed as the document's effective date or	loes not meet the applicable statute	ory filing requirements, this date will not be
4. A description of occurrence that result 605.0707, Florida Statutes, (copy 605.	ited in the limited liability components on back cover letter).	pany's dissolution pursuant to section
The Company was created to hold a	an asset as investment. The as	sset was sold and therefore there is no
_more need for the Company to rem	nain active and we want to dis	solve it.
5. If there are no members, enter the nan activities and affairs:	me and address of the person ap	ppointed to wind up the company's
6. Signature of an authorized person or i above to wind up the company's activitie	If there are no members, the signs and affairs:	nature of the person appointed and listed
An h.		
/	RICARDO HA	
Signature		Printed Name

**FILING FEE: \$25.00**