

**L160000 79730**

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

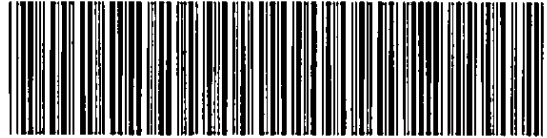
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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2019 DEC 30 AM 10:27

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JAN 09 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Phoenix Cornerstone, 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:

Juan Osorio  
(Name of Person)

Phoenix Cornerstone, LLC  
(Firm/Company)

4227 Shrewbury Pl  
(Address)

Land o Lakes FL 34638  
(City/State and Zip Code)

For further information concerning this matter, please call:

Juan Osorio at (813) 235 4149  
(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Phoenix Cornerstone, LLC

2019 DEC 30 AM 10:27

2. The Articles of Organization were filed on 4/22/16 and assigned

document number L16000079730

3. The delayed effective date the dissolution is not effective on the date of filing: 12/31/19  
(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).

Company was dissolved

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

Juan Osorio

41227 Shrewsbury FL

Land o Lakes FL 34638

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]  
Signature

Juan Osorio  
Printed Name

FILING FEE: \$25.00