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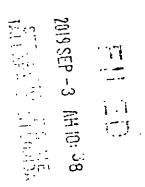
(Requestor's Name)				
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(City/State/Zip/Phone #)				
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COVER LETTER

TO: Registration Section Division of Corporations

Florida Prime Real Estate Group, 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:

Silvia De Leon

(Name of Person)

Florida Prime Real Estate Group, LLC

(Firm/Company)

1206 24th. Street

(Address)

Orlando FI 32805

(City/State and Zip Code)

For further information concerning this matter, please call:

Silvia De Leon

407

717-3958

(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

The name of a limited liability	STATE GROUP, LLC			
2. The Articles of Organization w	ere filed on	5/03/2016	and assigned	
document numberL16	6000087280			
	e cannot be prior to or m block does not meet th	ore than 90 days later than data ne applicable statutory filing	ng: e document is received for filing) g requirements, this date will not be	
. A description of occurrence tha 605.0707, Florida Statutes, (cop	nt resulted in the lim by 605.0707 on back	ited liability company's o	dissolution pursuant to section	
Dissolution resulted as DBPR r	equested to exclude	one member from the L	LC due the fact that	
5. If there are no members, enter t	he name and addres	s of the person appointed Silvia De Leon	I to wind up the company's	
activities and affairs:		1206 24th. Street	IS SEP	
_		Orlando, FL	. ω 	
_		32805	() () () () () () () () () ()	
. Signature of an authorized pers isted above to wind up the compa	on or if there are no ny's activities and a	members, the signature offairs:	of the person appointed and	
She De Leon		Silvia De Leon		
Signature		Printed Name		

FILING FEE: \$25.00