2/6000106612

(Requestor's Name)
(Address)
. (Address)
-
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Danward Musek and
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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1/2/

Office Use Only



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18 SEP - 4 AM 6: 11
SECRETARIANT OF STATE

K. SALY SEP 1 0 2018



August 2, 2018

MR LINDSEY N ALLEN 8725 PLACIDA RD. #7-507 PLACIDA, FL 33946

SUBJECT: T3200 LLC

Ref. Number: L16000106612

We have received your document for T3200 LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$55.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

2018 RUE 30 PH 1:52

Letter Number: 018A00015952

2018 AUG 30 PH 1: 22

(f)

COVER LETTER

Division of Corporations	
SUBJECT:	ed Liability Company)
(Name of Limit	ed Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	<u> </u>
Please return all correspondence concerning this matter to	the following:
MR LINDSEY N). ALLEN ne of Person)
(Firm	n/Company)
8725 PLACIDAR	2 # 7-507 Address)
PLACIDA, FL (City/State	33946 te and Zip Code)
For further information concerning this matter, please call:	
(Name of Person)	at (847) 507-7557 (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

F	ILED
TALLASIA	4 AM 6: 10
TO HASSY	AM 6: 10
	<i>>11UA</i>

The name of a limited liability company is	TALLAHAC TUE 10
T 3200 LLC	TALLAHASSEE, FLORIDA
2. The Articles of Organization were filed on	
document number <u>L</u> 16000/066/12	
3. The delayed effective date the dissolution if not effect (effective date cannot be prior to or more Note: If the date inserted in this block does not meet the a listed as the document's effective date on the Department or	than 90 days later than date document is received for filing) pplicable statutory filing requirements, this date will not be
4. A description of occurrence that resulted in the limited 605.0707, Florida Statutes, (copy 605.0707 on back co	l liability company's dissolution pursuant to section ver letter).
IN ACCORDANCE WITH SECTION 10.1	(a) of the Operating Agreement
THE SOLE MEMBER CONSENTED TO THE	TERMINATION OF THE COMPANY INCLUDING
THE SALE OF ITS OPERATING ASSETS AND	5/8/18 AND DISSOLUTION UPON THE COMPLETION
OF BUSINESS AFFAIRS AND PAYING	OUTSTANDING LIABILITES,
5. If there are no members, enter the name and address of	
activities and affairs: MR LINDSET	N. ALCON
8725 PLACI	DA ROAD # 7-507
PLACIDA, FL	- 33946
·	
6. Signature of an authorized person or if there are no mel listed above to wind up the company's activities and affair	mbers, the signature of the person appointed and
TX 4Cla	Linosey N. ALLEN
Signature	Printed Name

FILING FEE: \$25.00