## 116000177664

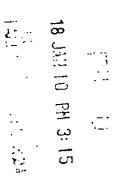
(Re	equestor's Name)			
(Ac	idress)			
(Ac	ldress)			
. (Ci	ty/State/Zip/Phone	e #)		
. PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
•				
(DC	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



500306755525

12/20/17--01017--003 \*\*25.00



O SIMMONS
JAN 1 1 2018



December 21, 2017

WRENN SLOAN 301 W ATLANTIC AVE, STE 5 DELRAY BEACH, FL 33444

SUBJECT: NORTHSTAR SOBER LIVING LLC

Ref. Number: L16000177664

We have received your document for NORTHSTAR SOBER LIVING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

We are enclosing the proper form(s) with instructions for your convenience.

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

Octavia L Simmons Regulatory Specialist II

Letter Number: 717A00025832

RECEIVED

JAN 1 1 2018

## COVER LETTER

**TO:** Registration Section

**Division of Corporations SUBJECT:** Northstar Sober Living LLC DOCUMENT NUMBER: <u>L</u>16000177664 The enclosed Notice of Limited Liability Company Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wrenn Sloan (Name of Contact Person) Northstar Sober Living (Firm/Company) 301 W Atlantic Ave Suite 5 Delray Beach, FL 33444 (City/State and Zip Code) For further information concerning this matter, please call: Wrenn Sloan (Name of Contact Person) (Daytime Telephone Number) Enclosed is a check for the following amount: ■\$25 Filing Fee □ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee. Certificate of Status Certificate of Status & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed) MAILING ADDRESS: STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of Northstar Sol	a limited liabi	lity company is			·'
2. The Articles	of Organizatio	on were filed on $\frac{9-22-}{}$	2016	and assigned	
document nu	mber <u>L160001</u>	77664			
Note: If the	effective) date inserted in		more than 90 days later that the applicable statutory	of filing:  an date document is received for filing filing requirements, this date wil	
4. A description 605.0707, Flo	n of occurrence orida Statutes,	e that resulted in the li (copy 605.0707 on ba	imited liability compa ck cover letter).	my's dissolution pursuant to se	ection
Dissolved by	a unanimous cor	nsent of Members			
				,	65 (35)
					6
				<u> </u>	ر ان المارا المارا
5. If there are no members, en activities and affairs:		nter the name and addr Wrenn Sloan	ress of the person app	ointed to wind up the company	/ s / s
		Northstar Sober Livi	ng		
		301 W Atlantic Ave	Suite 5		<del></del>
		Delray Beach, FL 33444			
6. Signature of listed above to v	an authorized wind up the co	person or if there are mpany's activities and	no members, the signa I affairs:	ature of the person appointed a	ınd
Wren	~ 5	loan	Wrenn Sloan		
Signature			Printed Name		

**FILING FEE: \$25.00**