# 116000185116

(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(,,	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	$\neg$

Office Use Only



400296976344

03/24/17--01009--025 \*\*50.00

MAR 2 7 2017 S. YOUNG 17 MAR 24 PM 3: 17



#### **COVER LETTER**

TO:	Registration Section
	Division of Corporation

SUBJECT: Arbor 47 Rentals 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:

## Joseph Mamari

(Name of Person)

## president

(Firm/Company)

## 9975 Royal cardigan way

(Address)

## West Palm Beach FI 33411

(City/State and Zip Code)

For further information concerning this matter, please call:

### Diana Mamari

,,561 、

6678884

(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

17 HIR 24 PH 3: 1

#### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

l.	The name of a limited liability company is Arbor 48 Rentals LLC	
2.	. The Articles of Organization were filed or	10/05/2016 and assigned
	document number L16000185116	
3.		rior to or more than 90 days later than date document is received for filing) not meet the applicable statutory filing requirements, this date will not be
4.	A description of occurrence that resulted i 605.0707, Florida Statutes, (copy 605.070	n the limited liability company's dissolution pursuant to section 7 on back cover letter).
	never been use	
		4
		₹ 21
		THAR 24 PH
		프 뜻
5.	If there are no members, enter the name an activities and affairs:	nd address of the person appointed to wind up the company's
6. lis	Signature of an authorized person or if the sted above to wind up the company's activities	ere are no members, the signature of the person appointed and ties and affairs:
		Joseph Mamari
	Signature	Printed Name

FILING FEE: \$25.00