## 1600/89081

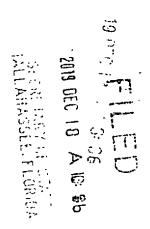
(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
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## **COVER LETTER**

	istration Section ision of Corporations		: د فضر				
;	Properties Investment Fund IX, LLC		5.4				
SUBJECT:	(Name of Limi	ted Liability Company)	_				
The enclosed	Articles of Dissolution and fee(s) are submi	tted for filing.					
Please return	all correspondence concerning this matter to	the following:					
	Daniel E. Manausa, Esq.						
	(Na	me of Person)					
	Manausa Law Firm, P.A.						
	m/Company)						
	1701 Hermitage Blvd., Suite 100						
		(Address)					
	Tallahassee, FL 32308						
	(City/St	ate and Zip Code)					
For further in	oformation concerning this matter, please cal	l:					
Dar	niel E. Manausa	850 597-7616 at ()					
<del></del>	(Name of Person)	at () (Area Code & Daytime Telephone Number)	_				
Enclosed is a c	theck 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:		Street Address:					
Registration Section Division of Corporations		Registration Section Division of Corporations					
P.O	D. Box 6327	The Centre of Tallahassee					
Tall	lahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	ne of a limited liabi	• • •	···	_		
2. The Ar	icles of Organizatio	n were filed on 10/12/2016		and assigned		
docume	ent number L160001	89081				
Note:	effective) If the date inserted in	the dissolution if not effective date cannot be prior to or more the this block does not meet the apportive date on the Department of	an 90 days later than date do blicable statutory filing re	ocument is	received t	for filing) ate will not
A descr	iption of occurrence	that resulted in the limited legon to the transfer of the coverage of the cove	iability company's diss	solution p	oursuant	to section
	y has been liquidated		retter).			
Compan	has been liquidated			差点	201	
Company	has been liquidated			CRE D	3 DEC	1 3 2 3
				3388	8	
. If there	are no members, en	ter the name and address of t	he person appointed to	wind up	thegon	rm: ipany's
activitie	s and affairs:	Remco, LLC c/o Manausa L	aw Firm, P.A.	T.3	<u>ණ</u> —	<del></del>
		1701 Hermitage Blvd., Suite	100			
		Tallahassee, FL 32308				
. Signatu bove to w	re of an authorized pind up the company	person or if there are no mem 's activities and affairs:	bers, the signature of t	he persor	appoin	ted and list
ĺΛ		D.	aniel E. Manausa			
	Signature		Printed 1	Vame		

FILING FEE: \$25.00