# W16000 211999

_			
(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:			
O SILAN			
Special Instructions to Filing Officer:			





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### **COVER LETTER**

TO:	Registration Section Division of Corporations	e ·			
CHD II	CARRINO PROPERTIES LLC	•			
SUBJECT: (Name of Limited Liability Company)					
The en	nclosed Articles of Dissolution and fee(s) are sub-	mitted for filing.			
Please	return all correspondence concerning this matter	to the following:			
	DENNIS M CARRINO				
(Name of Person)					
(Firm/Company)					
	702 SE ADAMS CT				
	(Address)				
	PORT ST LUCIE, FLORIDA 34984				
	(City	/State and Zip Code)			
For fu	orther information concerning this matter, please of	call:			
DENNIS M CARRINO		772 359-2012at ()			
	(Name of Person)	at ()  (Area Code & Daytime Telephone Number)			
Enclos	sed 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:	Street Address:			
Registration Section Division of Corporations P.O. Box 6327		Registration Section Division of Corporations			
		The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

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

A LIMITED LIABILITY COMPANY				
The name of a limited liabi	•	- £8 23 ,用 g: 广		
The Articles of Organization	n were filed on 11-18-2016	and assigned		
document number L160002	11999			
(effective Note: If the date inserted in	the dissolution if not effective on the date cannot be prior to or more than 90 days to this block does not meet the applicable state tive date on the Department of State's reco	ater than date document is received for filing) tutory filing requirements, this date will not		
A description of occurrence 605.0707, Florida Statutes,	that resulted in the limited liability co (copy 605.0707 on back cover letter).	mpany's dissolution pursuant to section		
SOLD PROPERTY OWNED	BY LLC THEREFORE LLC IS NOT NEE	EDED ANYMORE		
		·		
If there are no members, en activities and affairs:	ter the name and address of the person	appointed to wind up the company's		
Signature of an authorized poove to wind up the company	person or if there are no members, the sactivities and affairs:	signature of the person appointed and lis		

DENNIS M CARRINO

Printed Name

## Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company:	ROPERTIES LLC
Document number of Limited Liability Company	L16000211999 is:
Date of dissolution was:  DATE OF FILING (OF	AICTICIES OF DISSOLUTION)
Description of information that must be included i	
AMOUNT, RELATED DATE, REASON FOR CLAIM	л 
<del></del>	
	<u> </u>
Mailing address where claims can be sent: (Claims	s cannot be sent to the Division of Corporations)
702 SE ADAMS CT	
PORT ST LUCIE, FLORIDA 34984	
A claim against the above named limited liability claim is commenced within 4 years after the filing	company will be barred unless a proceeding to enforce the of this notice.
DENNIS M CARRINO	De Mi Carrer
Printed Name of the Person Filing	Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00