

L1600214649

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

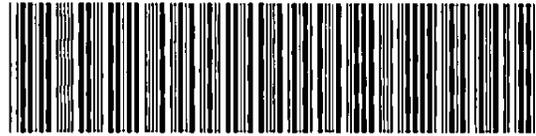
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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300322069523

Michigan Secretary of State

2019 DEC 13 P 6:08

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12/13/19 5:41:18

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 540548 4612432  
AUTHORIZATION : *Squibbaleman*  
COST LIMIT : \$ 25.00

ORDER DATE : December 13, 2018  
ORDER TIME : 3:34 PM  
ORDER NO. : 540548-005  
CUSTOMER NO: 4612432

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2018 DEC 13 P 6:08

DOMESTIC FILINGS

NAME: CONSTANTINO FAMILY LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX            PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft - EXT# 62925

EXAMINER'S INITIALS: \_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Constantino Family 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:

Frank C. Constantino  
(Name of Person)  
Constantino Family LLC  
(Firm/Company)  
6025 Sunnyslope Drive  
(Address)  
Naples, Florida 34119  
(City/State and Zip Code)

2019 DEC 13 P 6:08

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For further information concerning this matter, please call:

Frank Constantino at ( 609 ) 870-0200  
(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

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

1. The name of a limited liability company is

Constantino Family LLC

2. The Articles of Organization were filed on November 21, 2016 and assigned

document number L16000214649

3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

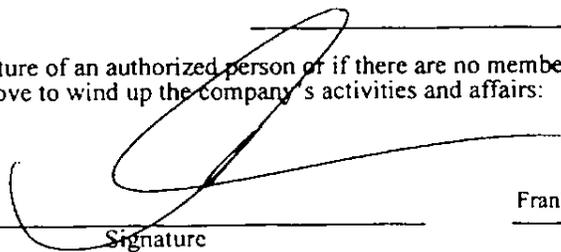
The Company is being dissolved pursuant to the consent of all of the members.

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2016 DEC 13 P 4:08  
TALLAHASSEE, FLORIDA

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:



Frank C. Constatino

Printed Name

**FILING FEE: \$25.00**