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COVER LETTER

Registration Section

* Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT: Economical Housing Development LLC					
(Name of Limited Liability Company)					
201 - 1 - 1 A 2 1 - 610' - 1 2 - 1 C 4 2 - 1 2 2 2	1.6				
The enclosed Articles of Dissolution and fee(s) are submitted	i for filing.				
Please return all correspondence concerning this matter to the following:					
$C_0 \sim A + C_0 + C_0$					
Edward J Pinto					
(Manie OFF Craon)					
Economical Housing Development LLC					
(Firm/Company)					
531 S. Washington Orive					
(A U ress)					
Sacasata Florida 342.36					
Sarasota, Florida 34236 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Edward T Pinto at (240) 423-2848 (Name of Person) (Area Code & Daytime Telephone Number)					
(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)				
Mallian Address.	Cause Address.				
Mailing Address: Registration Section	Street Address: Registration Section				
Division of Corporations Division of Corporations					
P.O. Box 6327	The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liab	allity company is			The same
Economical	, ,	Develoome	nt LLC	
2. The Articles of Organizati	on were filed on <u></u>	ebruary 22,		
3. The delayed effective date	the dissolution if n we date cannot be prior to this block does not to	not effective on the date to or more than 90 days late neet the applicable status	er than date document is rece tory filing requirements, t	ived for filing) his date will not be
4. A description of occurrence 605.0707, Florida Statutes,	(copy 605.0707 on	back cover letter).	pany's dissolution purs	
to dissolve				
5. If there are no members, en activities and affairs:	nter the name and a	ddress of the person a	opointed to wind up the	company's
				_
6. Signature of an authorized	person or if there a	re no members, the sig	gnature of the person ap	pointed and listed
above to wind up the company	/ s activities and af	fairs:		
Tollward &	ent	Edwal	Printed Name	
o-Ea-cm-c			CHIRCA PAINC	

FILING FEE: \$25.00