# 1700137394

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 10, 2018

JOSE BOSCH, ESQ 9300 S DADELAND BLVD 4TH FLOOR MIAMI, FL 33156

SUBJECT: 305 VOLLEYBALL CLUB, LLC

Ref. Number: L17000137394

We have received your document for 305 VOLLEYBALL CLUB, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Include written claim.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 818A00007176

RECEIVED
MISAPR 26 NY 11: 24
DEPARTMENT OF ST
DAY/SIGN OF CORPORE
TALLAHASSEE, PRO

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	305 VOLLEYBALL CLUB, LLC
2.	The Articles of Organization were filed on June 23, 2017 and assigned
	document number L17000137394
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.
	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 entity will be re-organized as a non-for-profit corporation.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	The control of the
i. ist	Signature of an authorized person or if there are no members, the signature of the person appointed and be dead above to wind up the company's activities and affairs:
	Alan Obrador
	Signature Printed Name
	FILING FEE: \$25.00

### 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: 305 VOLLEYBALL CLUB, LLC	
Document number of Limited Liability Company is: L17000137394	
Date of dissolution was: November 7, 2017	
Description of information that must be included in a written claim:	
Provide a reasonable description of the claim, including but not limited to	
name of claimant, amount of claim, date that the claim was originated	
and related documents, such as invoices or contracts related to	
the alleged claim.	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  C/O Jose Bosch, Esq.  9300 S Dadeland Blvd. 4th Floor	0
Miami FL 33156	
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.	
Alan Obrador  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