

L17000176436

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 11/4/19

NAME: LA DESIRADE 97, LLC.

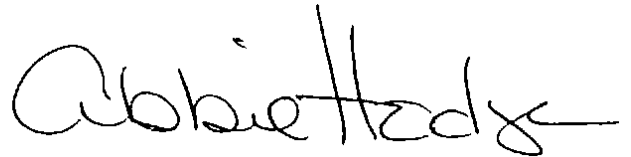
TYPE OF FILING: DISSOLUTION

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

A handwritten signature in black ink, appearing to read "Abbie Hodge", is written over the printed name "ABBIE/PAUL HODGE". The signature is fluid and cursive, with a long horizontal stroke at the end.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LA DESIRADE 97, 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:

MARIA DE BEDOUT

(Name of Person)

Next Legal

(Firm/Company)

1395 Brickell Avenue, Suite 950

(Address)

Miami, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

MARIA DE BEDOUT

(Name of Person)

at (786) 930-2896

(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**

FILED

1. The name of a limited liability company is

LA DESIRADE 97, LLC.

2017 NOV -4 P 12:51

2. The Articles of Organization were filed on 08/17/2017

and assigned to
TALLAHASSEE, FLORIDA

document number L17000176436

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).

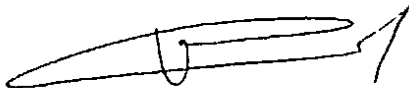
Upon the filing of the articles of dissolution, the limited liability company shall cease conducting its business

and shall continue solely for the purpose of winding up its affairs in accordance with s. 605.0709, except for the

purpose of lawsuits, other proceedings, and appropriate action as provided in this chapter.

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:



Signature

VIVIANE GABRIEL

Printed Name

FILING FEE: \$25.00