# L18000103750

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APPROVED AND FILED

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### **COVER LETTER**

TO: Registration Section Division of Corporations

URIFCT: 100 NW 86 ST, 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:

Hector Lastre	
(Name of Person)	
100 NW 86 ST, LLC	-1
(Firm/Company)	2019
3801 Anderson Road	PR PR PR
(Address)	
Coral Gables, FL 33134	PH PH
(City/State and Zip Code)	

For further information concerning this matter, please call:

Hector Lastre at ( 305 ) 606-4987 (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 liabil	ity company is			·	
2.	The Articles of Organizatio	n were filed on $\frac{4/24/18}{}$		_ and assigned		
	document number L1800010	03750				
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 605.0707, Florida Statutes, (	that resulted in the limi copy 605,0707 on back	ited liability company's di cover letter).	ssolution pursuant to	o sectio	n
	The purpose of the business of	100 NW 86 ST, LLC is ee	ompleted.			
				ALL AMERICA	2019 APR 10   F	APPROV AND FILEC
5.	If there are no members, en	ter the name and address  Hector Lastre	s of the person appointed	to wind up the comp	any <del> နို</del>	) (Eu
	activities and affairs:	3801 Anderson Road			<u></u>	
		Coral Gables, FL 3313-	1			
6. lis	Signature of an <sub>t</sub> authorized patter above to wind up the cor	person or if there are no inpany's activities and a	members, the signature of	f the person appointe	ed and	
	The st	$\overline{}$	Hector Lastre			
	- Company	<del></del>	Drintad	Nama		

**FILING FEE: \$25.00**