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COVER LETTER

TO: **Registration Section Division of Corporations**

THE ENCLAVE LOT 10 LLC **SUBJECT:**

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JORGE R SALCEDO

Name of Person

SALCEDO ATTORNEYS AT LAW P.A.

Firm/Company

200 S BISCAYNE BLVD SUITE 2700

Address

MIAMI, FL 33131

City/State and Zip Code

JSALCEDO@LAWJSH.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (____ JORGE R SALCEDO, ESQ. 375-0640

Name of Person

Area Code Daytime Telephone Number

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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CR2E141 (2/14)

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination: FIRST: The name of the limited liability company is:

SECOND: The Florida Document number of the limited liability company is: ______

THIRD: The date of filing of the initial articles of organization is: _____

FOURTH: The date of filing of the dissolution is:

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

Signature of Authorized Representative

BERNARDO AROSIO

Typed or printed name of signature

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)



CR2E141 (2/14)

to

12/22/2020