# L18 000 387 631

(Red	questor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

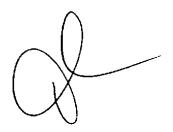
Office Use Only



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# **COVER LETTER**

TO:

	egistration Section ivision of Corporations		
SUBJECT	Granite Growth 31, LLC		
3000001		ted Liability Company)	
	ed Articles of Dissolution and fee(s) are submi	_	
	Donna Colavito		
	(Na	me of Person)	_ <del>_</del>
	Granite Associates, Inc.		
	(Fir	nn/Company)	
	225 Banyan Boulevard, Suite 130		
	(Address)		DEC.
	Naples, FL 34102		
	(City/St	ate and Zip Code)	SSE
For further	information concerning this matter, please call	:	E PA
D	Oonna Colavito	845 295-2763 at ()	্বেট
_	(Name of Person)	(Area Code & Daytime Telephone N	lumber)
Enclosed is a	a check for the following amount:		
<b>≡</b> \$2	25.00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissoluti Certified Copy (additional copy is enclosed)	
Re D P.	egistration Section ivision of Corporations O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
Ta	allahassee, FL 32314	2415 N. Monroe Street, Suite 810	!

Tallahassee, FL 32303

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  Granite Growth 31, LLC		
2.	The Articles of Organization were filed on December 13, 2018 and assigned		
	document number <u>L18000287631</u>		
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).		
	Consent of all members pursuant to operating agreement.		
	NS ST		
	EE STATE OF THE ST		
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. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:		
>	Adam Gerry, Manager		
	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:	LC
Document number of Limited Liability Company is: L180	00287631
Date of dissolution was:	
Description of information that must be included in a writ	ten claim:
Name, address & e-mail address of claimant	
Reason for claim	2022 TA
Amount of claim	DEC
	HAS
	ÖC T
Mailing address where claims can be sent: (Claims cannot	t be sent to the Division of Corporations)
Granite Growth 31, LLC	
225 Banyan Boulevard, Suite 130	
Naples, FL 34102	
A claim against the above named limited liability compan claim is commenced within 4 years after the filing of this	
Adam Gerry, Manager	78
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