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O SIMMONS MAR 18 2022

COVER LETTER

Tallahassee, FL 32314

TO: Registration Section Division of Corporations	
SUBJECT: Dondelinger Real (Name of Limited	Estate Orlando 2, LLC Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	following:
Dolores Dondeli Name Dolores Donde (Firm)	
PO BOX 641146 (Ad BRURCHY Hill) FL (CHYSTATE)	dress)
(City/State a	and Zip Code)
For further information concerning this matter, please call:	
Dolores Dondelinger (Name of Person)	at (407) 990 (257 (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:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

2022 HAR II AM 6: 35

1. The name of a Dondeli		y company is altestate	Orlando	02, LL	C.	·: ·
	•	were filed on A			nd assigned	
document nun	1ber <u>L 190</u>	00202163				
Note: If the d	effective d) ate inserted in thi	e dissolution if not effe ate cannot be prior to or my s block does not meet the we date on the Departme	ore than 90 days lat e applicable statt	er than date docu itory filing requ		
605.0707, Flor	ida Statutes, (c	hat resulted in the limitopy 605,0707 on back	cover letter).		•	
_ I he	Curba	ny was	<u>Sold</u>	102+,	year.	
						
		r the name and address	~ 1 1		ind up the com	pany`s
activities and a	affairs:	DO BOX	Donde (0411L	J		
		BRURY by H	ills, FL	344	(c4	
6. Signature of a above to wind up	n authorized pe the company's	rson or if there are no activities and affairs:	members, the s	ignature of the	person appoint	ed and listed
) Dandi	Signatura		Polo	ceS J 🔽 Printed Na	>andeli	~~&e1

FILING FEE: \$25.00