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02/04/22--01010--013 . **25.00 2002 FEB -4 65 H: 17

COVER LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT: 1640 Pointe West	Way LLC Liability Company)			
(Name of Elimea	Embyri, Company)			
The enclosed Articles of Dissolution and fee(s) are submitted	d for filing.			
Please return all correspondence concerning this matter to the	e following:			
Name of Person)				
(Name of Person)				
$\frac{\sqrt{o}\sqrt{\mathcal{E}}}{\text{(Firm/Company)}}$				
(Firm/Company)				
Do Box 2044294 (Address) LEKO Beach LL 32964 (Cit/State and Zip Code)				
/	(ldress)			
1/2 52 1 1/2 2 2014/				
(Cit/State and Zin Code)				
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Factoring and a second of the patter place calls				
For further information concerning this matter, please call:				
$\langle \rangle$	200 (182-2931)			
(Name of Person)	at (209) 482 - 2934 (Area Code & Daytime Telephone Number)			
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Enclosed is a check for the following amount:				
□ \$25,00 Filing Fee and Certificate of Dissolution	The ess we tell in the constitution and bloom belong to			
♥ \$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 32314	2413 N. WIGHOU SHEEL, SHILL OTO			

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is			
	1640 Points West WAY, LLC			
2.	The Articles of Organization were filed on $10/01/02019$ and assigned			
	document number <u>L 19 000 254317</u>			
3.	The delayed effective date the dissolution if not effective on the date of filing: 207/2022 (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.	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).			
	Sold Groperty 2021			
	022			
5	If there are no members, enter the name and address of the person appointed to wind up the company's			
•	activities and affairs: Susan Robinson owner Mgr			
	PO BOX 644294			
	VERO Beach, FL 32944			
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:			
(Susan Robinson			
	Signature Printed Name			

FILING FEE: \$25.00