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5. YOUNG

COVER LETTER

	tion Section of Corporations				
SUBJECT:	CASSINI	MIAMI	PROPERTIES, 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:					
-	4	ATIA	M. ALMEIN e of Person)		
-		MIZMI	PROPERTIES, LLC		
-	17201	Collins 1	Avenue, Unit 3404		
	(Address)				
SUNNY ISLES BEACH, FL 33160 (City/State and Zip Code)					
For further information concerning this matter, please call:					
CAUDIO A. ALMEIDX at (305), 766 - 8168 (Area Code & Daytime Telephone Number)					
(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
▼ \$25,00 Fi	iling Fee and Certificate of	Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
Registr Divisio P.O. Bo	Address: ation Section on of Corporations ox 6327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	P3
1. The name of a limited liability company is CASSINI MIAMI PROPE	erties, LLC
2. The Articles of Organization were filed on	# 25, 2020 and assigned
document number <u>L20000 89 8</u> 8	3. The effective date owas
3. The delayed effective date the dissolution if not effective (effective date cannot be prior to or more than Note: If the date inserted in this block does not meet the appl listed as the document's effective date on the Department of S	n 90 days later than date document is received for filing) icable statutory filing requirements, this date will not be
4. A description of occurrence that resulted in the limited lia 605.0707, Florida Statutes, (copy 605.0707 on back cover the pignned in Vestment)	ability company's dissolution pursuant to section letter). did not take place
due to the coveravious	pandemic. All member
consent to this dissolu	110y.
If there are no members, enter the name and address of the activities and affairs:	e person appointed to wind up the company's
6. Signature of an authorized person or if there are no memb	pers, the signature of the person appointed and listed
above to wind up the company's activities and affairs:	
Leetter Aller	KATIA M. ALMEIDA
Signature	Printed Name

FILING FEE: \$25.00