

120 000293918

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

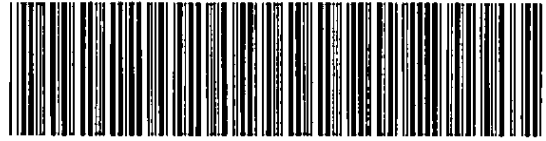
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2022 MAY 16 PM 2:52  
TALLAHASSEE, FL

g 5/21/2022

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 310 CARYSFORT 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:

Michael MARZANO  
(Name of Person)  
310 CARYSFORT LLC  
(Firm/Company)  
1660 NW 19<sup>th</sup> Avenue  
(Address)  
Pompano Beach FL 33069  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael MARZANO at (954) 931-3021  
(Name of Person) (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:**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 23, 2022

MICHAEL MARZANO  
1660 NW 19TH AVENUE  
POMPANO BEACH, FL 33069

SUBJECT: 310 CARYSFORT LLC  
Ref. Number: L20000293918

We have received your document for 310 CARYSFORT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 322A00009525



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2022 APR 18 AM 11:49

SECRETARY OF STATE  
TALLAHASSEE, FL

March 28, 2022

MICHAEL MARZANO  
1660 NW 19TH AVENUE  
POMPANO BEACH, FL 33069

SUBJECT: 310 CARYSFORT LLC  
Ref. Number: L20000293918

We have received your document for 310 CARYSFORT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 822A00007213

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

2022 MAY 16 PM 2:52

1. The name of a limited liability company is

310 CARYSFORT LLC

SEC. STATE  
TALLAHASSEE, FL

2. The Articles of Organization were filed on 9/18/2020 and assigned

document number L20000293918

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.

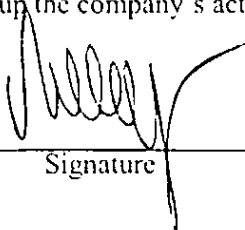
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Property was sold

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. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

  
\_\_\_\_\_  
Signature

Michael C. Marzano  
\_\_\_\_\_  
Printed Name

FILING FEE: \$25.00