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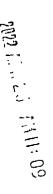
(Requestor's Name)					
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(Business Entity Name)					
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04/25/22--01014--012 **25.00



COVER LETTER

.

TO:	Registration Section Division of Corporations					
SUBJE	5740 MILES GRANT ROAD, LLC					
561515		ed Liability Company)				
	losed Articles of Dissolution and fee(s) are submit	_				
	Bradley Gies					
	(Name of Person)					
	Bradley Gies P.A.					
	(Firm/Company)					
	1983 PGA Blvd, Ste 104b					
		(Address)				
	Palm Beach Gardens, FL 33408					
	(City/Sta	ate and Zip Code)				
For furt	her information concerning this matter, please call	:				
Bradley Gies		240 670-4437 at ()				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed	l 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 Division of Corporations	Registration Section Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, 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 liabil				
5740 MILES GRANT ROAD,	LLC			·
2. The Articles of Organization	were filed on 10/14/202	20	and assigned	
document number L2000032	6288	_		
3. The delayed effective date to the defective Note: If the date inserted in the listed as the document's effective date to the decument's effective date to the delayed date to the date to the delayed date to the delayed date to the delayed date	his block does not meet the	e applicable statutory f		ling) vill not
4. A description of occurrence 605.0707, Florida Statutes, (that resulted in the limit copy 605.0707 on back	ed liability company cover letter).	's dissolution pursuant to s	section
All members/managers voted to	o dissolve			603
5. If there are no members, ent		of the person appoi		 nv's
activities and affairs:		——————————————————————————————————————		
				
 Signature of an authorized pabove to wind up the company 	person or if there are no s activities and affairs:	members, the signatu	are of the person appointed	and li
h In		Bradley Gies		
Signature		Pr	inted 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:	
L20000 Document number of Limited Liability Company is:	326288
Date of dissolution was:	
Description of information that must be included in a writte	n claim:
The name of the claimant, address of the claimant, phone number	of the claimant,
claim amount, and the detailed circumstances leading to the clair	n.
Mailing address where claims can be sent: (Claims cannot b	be sent to the Division of Corporations)
4188 WESTROADS DR	
SUITE 112	
WEST PALM BEACH, FL 33407	
A claim against the above named limited liability company claim is commenced within 4 years after the filing of this no	
Bradley Gies	Andr
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