# L2000367657

(Requestor's Name)
(Adcress)
V. 1551.455,
(Address)
(Chi.(Chara (La.(Chara at
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Enlity Name)
(Document Number)
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Copies Certificates of Status
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Instructions to Filing Officer:
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Office Use Only



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J 3/29/2023

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195  REFERENCE : 607338 4321040  AUTHORIZATION : Springle Role  COST LIMIT : \$ 25.00						
ORDER DATE: March 28, 2023						
ORDER TIME : 10:33 AM						
ORDER NO. : 617335-005						
CUSTOMER NO: 4321040						
DOMESTIC FILINGS  NAME: SOUTHERN BELLE VENTURES II LLC						
XX ARTICLES OF DISSOLUTION						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING						
CONTACT PERSON: Eyliena Baker - EXT#						

EXAMINER'S INITIALS:

### **COVER LETTER**

	gistration Section vision of Corporations						
SUBJECT:	Southern Belle Ventures II LLC						
(Name of Limited Liability Company)							
The enclosed	d Articles of Dissolution and fee(s) are submi	itted for filling.					
Please return	all correspondence concerning this matter to	o the following:					
	Mary Golonka						
	(Na	me of Person)					
	ArentFox Schiff LLP						
	(Firm/Company)						
	233 South Wacker Drive, Suite 7100						
	(Address)						
	Chicago, IL 60606						
	(City/St	ate and Zip Code)					
For further in	nformation concerning this matter, please cal	l:					
Mary Golonka		312 258-4604 at ()					
	(Name of Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a c	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)					
	iling Address:	Street Address:					
	gistration Section vision 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



2023 MAR 28 AM 9: 53

. The name of a limited I	ability company is		Ţ.
Southern Belle Venture	s II LLC	<del></del>	
The Articles of Organiz	ation were filed on 12/03/2	2020	and assigned
document number L200	00367657		
The delayed effective d	ate the dissolution if not eff	fective on the date of fi	ling:
(effective date cannot be prior in this block does not meet effective date on the Depar	to or more than 90 days later that the applicable statutory filing tment of State's records.	in date document is received requirements, this date v	I for filing) Note: If the date inserted will not be listed as the document's
A description of occurre 605.0707, Florida Statut	ence that resulted in the limes, (copy 605.0707 on back	ited liability company's cover letter).	s dissolution pursuant to section
Property which entity of	riginally held was sold. Ti	he entity is no longer	doing business in Florida.
<del></del>	·- <u>·</u> -		<del></del>
	<del></del>	<u> </u>	
	·		
. If there are no members	, enter the name and addres	s of the person appoint	ed to wind up the company's
activities and affairs:			
		<del></del> -	
			· · · · · · · · · · · · · · · · · · ·
Signature of an authoriz	ed person or if there are no any's activities and affairs:	members, the signature	e of the person appointed and liste
-465A			
12/1/	$\overline{}$	John M. Buttine	
Signatur	· ·	Prir	ited 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: Southern Belle Ventu	ures II LLC
Document number of Limited Liability Company is: L2000	00367657
Date of dissolution was: March 28, 2023	
Description of information that must be included in a writt	en claim:
Detailed description of claim; the amount of the claim; any	supporting evidence of claim;
name/address/telephone of claimant	
Mailing address where claims can be sent: (Claims cannot	be sent to the Division of Corporations)
100 Lakeshore Drive, Unit 1153, North Palm Bead	h, FL 33408
A claim against the above named limited liability company claim is commenced within 4 years after the filing of this n	
John M. Buttine  Printed Name of the Person Filing	Signature of the Parson Filing
triated wante of the reison titing	Signature of the ragion crining

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00