

4/12/22, 10:26 AM

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH LLP
Account Number : I2016000081
Phone : (407)839-4277
Fax Number : (407)839-4264

LLC DISSOLUTION OR WITHDRAWAL
TRG HIALEAH MEMBER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2022 APR 12 AM 11:52

2022 APR 12 PM 3:50

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Corporate Filing Menu

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRG Hialeah Member, 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:

Kristi Dickison

(Name of Person)

Nelson Mullins Riley & Scarborough

(Firm/Company)

390 N. Orange Avenue

(Address)

Orlando, FL 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Kristi Dickison

407

951-4222

at (

(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:

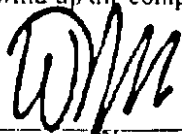
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
TRG Hialeah Member, LLC
2. The Articles of Organization were filed on July 14, 2021 and assigned
document number L21000322763
3. The delayed effective date the dissolution if not effective on the date of filing: 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).
the limited liability company is being dissolved pursuant to the consent of the member(s).

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: William T. Fabbri, Manager
477 South Rosemary Avenue, Suite 301
West Palm Beach, FL 33401

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

William T. Fabbri, Manager

Printed Name

FILING FEE: \$25.00

FILED

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