L21000428626

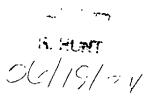
(Requestor's Name)						
(Address)						
(<i>i.</i> (date 35)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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COVER LETTER

TO:	egistration Section ivision of Corporations				
SUBJ	Caliber Indian Harbour Beach Dev Co. ELC				
(Name of Limited Liability Company)					
	ed Articles of Dissolution and fee(s) are submitted for filing. rn all correspondence concerning this matter to the following:				
	Pamela Uran				
	(Name of Person) Fredrikson & Byron, P.A. (Firm-Company)				
	Fredrikson & Byron, P.A.				
	60 South 6th Street, Suite 1500				
	(Address)				
	Minneapolis, MN 55402				
	(City/State and Zip Code)	'			
For fu	information concerning this matter, please call:	<u>ي</u> ت			
	amela Uran 612 492-7731 at ()				
	(Name of Person) (Area Code & Daytime Telephone Number)				
Enclos	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)				
	lailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, 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

 The name of a limited liability comp 	any is		
Caliber Indian Harbour Beach Dev Co,	LLC		<u> </u>
. The Articles of Organization were fi	led on 09/29/2021	and assigr	ned
document number L21000428626			
3. The delayed effective date the dissol (effective date canno Note: If the date inserted in this block listed as the document's effective date	does not meet the applicable sta	atutory filing requirements.	ceived for filing) , this date will not b
4. A description of occurrence that resu 605.0707, Florida Statutes, (copy 605	ulted in the limited liability co 5.0707 on back cover letter).	ompany's dissolution pu	rsuant to section
The entity is no longer doing business.			
5. If there are no members, enter the na	me and address of the persor		he company's
activities and affairs:			
	i j. i.		
5. Signature of an authorized person or above to wind up the company's activiti	if there are no members, the ies and affairs:	signature of the person	appointed and liste
OocuSigned by:	William Mo	eCall	
Signature		Printed Name	

FILING FEE: \$25.00