

L 21 000 456674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

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2023 MAR 10 PM 2:53

CLERK OF STATE  
TALLAHASSEE, FL

CL

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FEINSTEIN BVP XI HOLDINGS LLC

**DOCUMENT NUMBER:** L21000456676

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elliot Feinstein

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

2711 S.OCEAN DRIVE2504

\_\_\_\_\_  
(Address)

HOLLYWOOD, FL 33019

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Elliot Feinstein

\_\_\_\_\_  
(Name of Contact Person)

at ( 305 )

9050305

\_\_\_\_\_  
(Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy  
(Additional copy is enclosed)

☐ \$60 Filing Fee,  
Certificate of Status & 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

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2023 MAR 10 PM 2:53  
STATE  
TALLAHASSEE, FL

## Notice of Limited Liability Company Dissolution

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: FEINSTEIN BVP XI HOLDINGS LLC

Document number of Limited Liability Company is: L21000456676

Date of dissolution was: 12/31/2022

Description of information that must be included in a written claim:


Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

2711 S.OCEAN DRIVE2504, HOLLYWOOD, FL 33019


A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Elliot Feinstein

Printed Name of the Person Filing



Signature of the Person Filing