| (Requestor's Name) | | |
|--|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filling Officer: | | |
| | | |
| | | |
| | | |

Office Use Only



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RECEIVED

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau mmoreau@incserv.com 850.656.7953

| REQUEST DATE 5/17/2023 | PRIORITY Regular Approval | OUR REF # (Order ID#) 1150324 |
|---|---------------------------|-------------------------------|
| ORDER ENTITY 2415 CASAS DE MARBELLA, LLC | | |
| PLEASE PERFORM THE FOLLOW 2415 CASAS DE MARBELLA, L File the attached dissolution doc | | |
| NOTES: \$25.00 Authorized | | |
| RETURN/FORWARDING INSTR | NICTIONS: | |

Please bill the above referenced account for this order.

ACCOUNT NUMBER: 120050000052

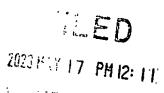
If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Wednesday, May 17, 2023 Page Lof 1

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



| 1. | The name of a limited liabilit | y company is | A Thank on |
|----------|---|---|---|
| | 2415 Casas de Marbella, LLC | | TERRY OF STATE |
| 2. | The Articles of Organization | were filed on January 28, 2022 | and assigned |
| | document number L22000050 |)184 ——————— | |
| 3. | the delayed effective date the dissolution if not effective on the date of filing:5/31/2023 | | |
| 4. | A description of occurrence t 605.0707, Florida Statutes, (c | that resulted in the limited liability coropy 605.0707 on back cover letter). | npany's dissolution pursuant to section |
| | The limited liability company ha | as wound up its affairs and is no longer tra | ansacting business. |
| | | | |
| | | , | |
| | | | |
| | | | |
| 5. | If there are no members, ente activities and affairs: | er the name and address of the person a | appointed to wind up the company's |
| | | | |
| | | | |
| | | | |
| | | | |
| 6. ab | Signature of an authorized peove to wind up the company's | erson or if there are no members, the signattivities and affairs: | ignature of the person appointed and listed |
| | | | |
| | W | Mark Martis | |
| | Signature | | Printed Name |

FILING FEE: \$25.00