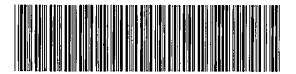
L23000392613

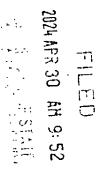
(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
,	,	
/Cib./6	State/Zip/Phone	40
(City/S	nate/Zip/Prione	#)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nam	e)
(Docu	ment Number)	
Certified Copies	Certificates	of Status
		
Special Instructions to Fili	ng Officer:	
	.05	NE
	J. HOT	2021
	J. HOP MAY ?	2700
	lan .	





000428662440

04/30/24--01003--003 **25.00

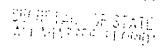


COVER LETTER

TO: Re Di	gistration Section vision of Corporations		
SUBJECT:	WOLF TERRACE MIAMI, LLC		
	(Name of Lin	nited Liability Com	pany)
The enclose	d Articles of Dissolution and fee(s) are subn	in a silver	
	n all correspondence concerning this matter	to the following:	
	Perla Sole Calas, Esq.		
	(N	ame of Person)	
	Corvo & Calas		
	(F	ігп/Сопралу)	
	14750 NW 77th CT. Suite 300		•
	<u> </u>	(Address)	
	Mismi Lakes, FL 33016		
	(City/Si	tate and Zip Code)	
For further in	formation concerning this matter, please cal	1:	
	nei Coalla	305	- 827 -0 084
	(Name of Person)	at (ode & Daytime Telephone Number)
			,,,
	heck for the following amount:		
₩ \$25. 0	00 Filing Fee and Certificate of Dissolution	S55.00 Filing Certified (g Fex, Certificate of Dissolution & Copy (additional copy is enclosed)
	ing Address:	Street Address	li.
	stration Section	Registration	
	sion of Corporations	Division of	Corporations
	P.O. Box 6327 Tallahassee, FL 32314		of Tullahassee
* 4111	uiuooce, i 15 343 14	Tallahassee,	nroe Street, Suite 810 FL 32303

FILED 2024 APR 30 AM 9: 48

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



1	The name of a limited liability company is WOLF TERRACE MIAMI, LLC
2	The Articles of Organization were filed on August 21, 2023 and assigned
	document number L23000392673
3.	The delayed effective date the dissolution if not effective on the 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).
	MEMBERSHIP VOTE
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	activities and attairs:
bc	Signature of an authorized person or if there are no members, the signature of the person appointed and listed we to wind up the company's activities and affairs:
	/\d
_	Karla Soto Guerrero Printed Name
	FILING FFF: \$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:
Document number of Limited Liability Company is:
Date of dissolution was: April 11, 2024
Description of information that must be included in a written claim:
Nature of Claim with all associated documentation; Name, Address, Phone Number and Electronic Mail,
Address for Claimant, Amount of Claim, Date Claim Incurred.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Corvo & Calas
14750 NW 77 CT
14750 NW 77 CT Suite 300
Suite 300
Suite 300 Miami Lakes, FL 33016 A claim against the above named limited liability company will be barred unless a proceeding to enforce the
Suite 300 Minmi Lakes, FL 33016
Suite 300 Miami Lakes, FL 33016 A claim against the above named limited liability company will be barred unless a proceeding to enforce the

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