

L23000544591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

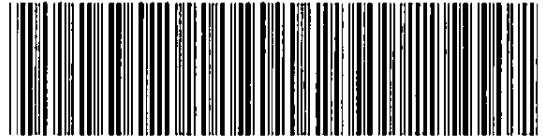
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900435255019

08/27/24--01:29--020 ♦♦25.01

FILED
2024 AUG 27 AM 8:17
CLERK OF COURT
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3204 Portofino Point 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:

Miriam E Stevens

(Name of Person)

(Firm/Company)

3521 NW 75th Terrace

(Address)

Lauderhill, FL 33319

(City/State and Zip Code)

For further information concerning this matter, please call:

Miriam E Stevens

(Name of Person)

954

829-0931

at (

_____) _____
(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**

FILED

2024 AUG 27 AM 8:17

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

1. The name of a limited liability company is

3204 Portofino Point LLC

2. The Articles of Organization were filed on December 8, 2023 and assigned

document number 123000544591

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).

LLC no longer needed.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Miriam E Stevens

3521 NW 75th Terrace

Lauderhill, FL 33319

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:

Miriam E Stevens

Signature

Miriam E Stevens

Printed Name

FILING FEE: \$25.00



August 21, 2024

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir/Madam:

RE: Dissolution of LLCs

I have enclosed three separate checks for three separate Articles of Dissolution. Each check is in the amount of \$25 to cover the cost of dissolution for each LLC. The three LLCs to be dissolved are as follows:

- 1) 3204 Portofino Point LLC (Check No. 1723)
- 2) 6021 Bermuda Club LLC (Check No. 1724)
- 3) 1102 Bahama Bend LLC (Check No. 1725)

Cover Letters and Articles of Dissolution forms are also enclosed for each LLC.

Please contact me if you have any questions regarding this matter.

Kind regards,

/s/ Cathy Laystrom
Legal Assistant

Encls.

(954) 233-0682
Law Office of Patricia Keyes P.A.
111 N Pine Island Rd Ste 203
Plantation, Florida 33324
info@myplaw.org