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SECRETARY OF STATE

K. SALY JAN 3 0 2018

COVER,LETTER

TO: Registration Section Division of Corporations

SRH MANAGEMENT & OPERATING CO., L.L.C.

(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:

MS. PARTICIA CARTAYA		
(Name of Person)		
(Firm/Company)		
900 MALAGA AVENUE		
(Address)		
CORAL GABLES, FLORIDA, 33134		
17 (1)		

(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICIA CARTAYA

 $\frac{1}{10}305 + 321-2272$

(Name of Person)

(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)

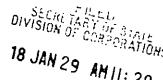
MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



1. The nan	ne of a limited liability com	pany is	TOAN 29 AMII: 2
SRH M.	ANAGEMENT & OPERATIN	IG CO., L.L.C.	
2. The Art	icles of Organization were I	filed on 99/07/1999	and assigned
docume	nt number	<u> </u>	
Note:		k does not meet the appl	e on the date of filing: JANUARY 18TH, 2018 in 90 days later than date document is received for filing) icable statutory filing requirements, this date will not state's records.
4. A deser 605.070	iption of occurrence that re 7. Florida Statutes, (copy 60	sulted in the limited li 05,0707 on back cover	ability company's dissolution pursuant to section r letter).
Accordi	ng to Section 605,0701, paragr	aph 1 of the Florida Stat	tutes (Merging of the Company) the Managing
	are no members, enter the test and affairs:	name and address of the	he person appointed to wind up the company's
	PATI	RICIA CARTAYA	
	900.3	MALAGA AVENUE	
	COR	AL GABLES, FLORID	A, 33134
6. Signate listed abo	ire of an authorized person, we to wind up the company.	or if there are no mems activities and affairs	nbers, the signature of the person appointed and
	I Cesting		PATRICIA CARTAYA
	Signature U		Printed Name

FILING FEE: \$25.00