

L11000085062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

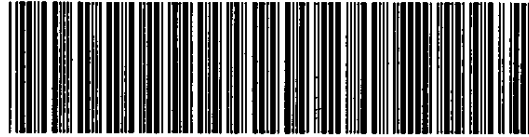
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L11-85062

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16 MAY 23 AM 11:11
TALLAHASSEE, FLORIDA
STATE

2016 MAY 23 PM 2:47

TALLAHASSEE, FLORIDA

MAY 27 2016
N. CAUSSEAU

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 5101 MARQUIS 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:

THOMAS GOLDMAN
(Name of Person)
GOLDMAN INTERNATIONAL LAW W
(Firm/Company)
11796 LONGSHORE WAY
(Address)
NAPLES FL 34119
(City/State and Zip Code)

For further information concerning this matter, please call:

THOMAS GOLDMAN at (239) 206-1474
(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 name of a limited liability company is
5101 MARQUIS LLC

2. The Articles of Organization were filed on JULY 25, 2011 and assigned
document number L11000085062

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2015
(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).

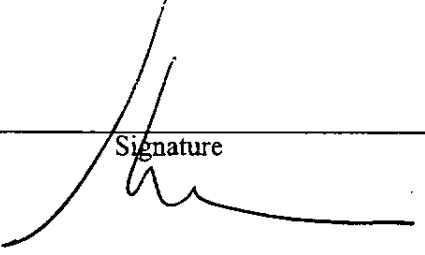
The Company will be dissolved because it no longer owns any assets, which was the sole reason for its existence.

The sole member has therefore decided to dissolve the company.

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

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16 MAY 23 AM 10:41
TALLAHASSEE
DEPARTMENT OF STATE
FLORIDA

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:


Signature

NILBRINK JOHN
Printed Name