

L04 0000 68612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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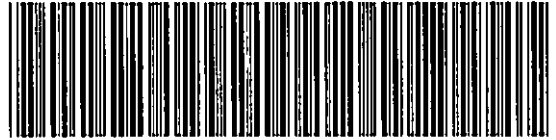
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 APR 29 PM 4: 02  
COMMERCIAL STATE  
OF MARYLAND

T GLASS

MAY 09 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 509 Isle of Capri LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fees) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Phillips  
(Name of Person)

Keller and Associates CPA  
(Firm/Company)

PO Box 1403  
(Address)

Vail, CO 81658  
(City/State and Zip Code)

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32301

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For further information concerning this matter, please call:

Michael Phillips at ( 970 ) 476-1692  
(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  
509 Isle of Capri, LLC

2. The Articles of Organization were filed on Sep 20th, 2004 and assigned  
document number L04000068612

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).  
Singe asset of 509 Isle of Capri was sold.

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Michael Phillips  
Keller and Associates, CPA  
PO Box 1403  
Vail, CO 81658

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SECRETARY OF STATE  
CORPORATION DIVISION

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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:

Michael L Phillips  
Signature

MICHAEL L. PHILLIPS  
Printed Name

**FILING FEE: \$25.00**