

L09000058692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

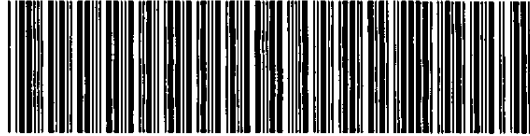
(Business Entity Name)

(Document Number)

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12/20/15

MAILED
15 DEC 15 AM 9:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 15 2015
J SHIVERS

William R. Calhoun, Jr.
212 Dawn Island Trail
Chapin, S.C. 29036
(803) 345-9229 Home
(803) 256-2233 Office
December 9, 2015

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

Dear Sir or Madam,

Enclosed is a completed form for dissolution of Calhoun Estate, LLC, Document No. L09000058629. Enclosed also is the Estate's check for \$25.00 for the filing fee for the articles of dissolution. Please make the dissolution effective as of December 31, 2015.

If you need to contact me, my information is provided above.

Please deposit the check promptly so it will clear before we close the Estate's account at the bank. Thank you very much.

yours truly,
William R. Calhoun

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Calhoun Estate, LLC

2. The Articles of Organization were filed on 6/17/2009 and assigned

document number L09000058692

3. The delayed effective date the dissolution if not effective on the date of filing: 12/30/2015
(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).

Consent of all members based on sale
of only LLC property.

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

William R. Calhoun, Jr.

212 Dawn Island Trail

Chapin, S.C. 29036

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TALLAHASSEE, FLORIDA

FILED

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:

William R. Calhoun, Jr.
Signature

William R. Calhoun, Jr.
Printed Name

FILING FEE: \$25.00