

L13000016437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

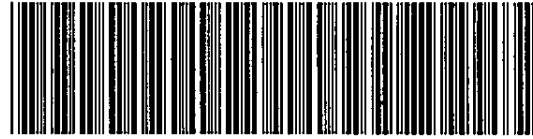
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch FEB 27 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Castle Palms, 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:

Dianne R. Bickford
(Name of Person)

Castle Palms, LLC
(Firm/Company)

2716 Silver King Way
(Address)

Sarasota, Florida 34231
(City/State and Zip Code)

For further information concerning this matter, please call:

Dianne Bickford at (719) 332-5704
(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

Castle Palms, LLC

2. The Articles of Organization were filed on January 31, 2013 and assigned

document number L13000016437

3. The delayed effective date the dissolution if not effective on the date of filing: _____

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).

Reason for LLC to handle rental properties has been abandoned.

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

Dianne R. Bickford

2716 Silver King Way

Sarasota, FL 34231

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

Printed Name

Dianne R. Bickford

Dianne R. Bickford

FILING FEE: \$25.00

FILED
14 FEB 27 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA