

L13000089111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

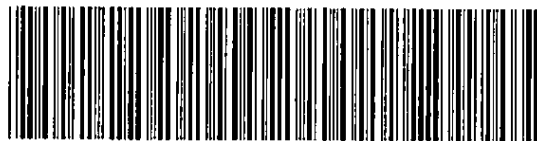
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 SEP -6 AM 9:58
REC. 11/19/19
2019 SEP -6 AM 10:55
FALLS CHURCH, VA

T GLASS

SEP 09 2019

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 892723 8117606
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : August 21, 2019
ORDER TIME : 8:48 AM
ORDER NO. : 892723-010
CUSTOMER NO: 8117606

DOMESTIC FILINGS

NAME: CUMBERLAND CONSULTING GROUP,
LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson - EXT# 62968

EXAMINER'S INITIALS: _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cumberland Consulting Group, 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:

Ashton Sanders

(Name of Person)

Cumberland Consulting Group, LLC

(Firm/Company)

720 Cook Springs Blvd, Suite 550

(Address)

Franklin, TN 37067

(City/State and Zip Code)

2019 SEP -6 AM 9:50

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For further information concerning this matter, please call:

Ashton Sanders

(Name of Person)

at (615) 373-4470 ext 111

(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
Cumberland Consulting Group, LLC
2. The Articles of Organization were filed on 6/20/2013 and assigned
document number L13000089111
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).

When our business was registered with the state originally, it was set up as a Florida domestic company in error.

We are dissolving the incorrect registration and re-registering the company with FL as a foreign company (DE

domestic entity).

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

Gary Meyer

720 Cool Springs Blvd., Suite 550

Franklin, TN 37067-2645

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

Gary Meyer, Authorized Person

Printed Name

FILING FEE: \$25.00

2019 SEP -6 AM 9:58

ARTICLE
ADD
FILED