

212 000 111658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

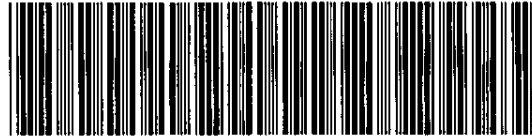
(Business Entity Name)

(Document Number)

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

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Office Use Only



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01/07/15--01010--004 \*\*25.00

FILED  
15 JAN -7 AM 11:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 16 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Acorn 6B Edgar Poole Real Estate, 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:

Tammie Etchells

(Name of Person)

Sabal Financial Group, LP

(Firm/Company)

4675 MacArthur Court Ste. 1550

(Address)

Newport Beach, CA 92660

(City/State and Zip Code)

For further information concerning this matter, please call:

Tammie Etchells

(Name of Person)

at ( 949 ) 381-2753

(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:**

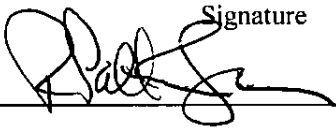
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**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  
Acorn 6B Edgar Poole Real Estate, LLC
2. The Articles of Organization were filed on 08/29/2012 and assigned  
document number L12000111658
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).  
Real Estate Sold, No Further Activity.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: R. Patterson Jackson  
4675 MacArthur Court Suite 1550  
Newport Beach, CA 92660  
\_\_\_\_\_
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

R. Patterson Jackson

**FILING FEE: \$25.00**

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TALLAHASSEE, FLORIDA