

L02000003542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 JUN 29 AM 9:33
NOTARY OF STATE
TALLAHASSEE, FLORIDA

JUN 30 2015
J. HARRIS

RECEIVED
15 JUN 26 PM 2:24
NOTARY OF STATE

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

ACCOUNT NO. : I20000000195

REFERENCE : 684428 7273065

AUTHORIZATION :



COST LIMIT : \$25,000

ORDER DATE : June 26, 2015

ORDER TIME : 10:36 AM

ORDER NO. : 684428-005

CUSTOMER NO: 7273065

DOMESTIC FILINGS

NAME: WOODLAND LAKES APARTMENTS,
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: Courtney Williams - EXT# 62935

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Woodland Lakes Apartments, 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:

Judy Michael

(Name of Person)

Woodland Lakes Apartments, LLC

(Firm/Company)

5619 DTC Parkway Suite 800

(Address)

Greenwood Village CO 80111

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(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
Woodland Lakes Apartments, LLC

2. The Articles of Organization were filed on August 5, 2011 and assigned
document number L02000003542

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).
Property has been 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: Robert Walker

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

Robert Walker

Printed Name

FILING FEE: \$25.00

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