

L03000012145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP      ☐ WAIT      ☐ MAIL

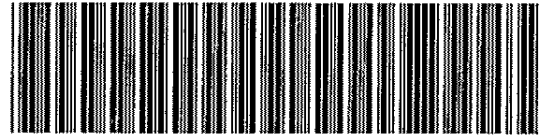
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900058125099

08/02/05--01023--004 \*\*30.00

SECRET  
REF ID: A66521

LO3-12145  
AK

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WMC Tuscaawilla, 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:

W. Malcolm Clayton

(Name of Person)

Claytons' Realty

(Firm/Company)

5405 Diplomat Circle, Suite 100

(Address)

Orlando, FL 32810

(City/State and Zip Code)

For further information concerning this matter, please call:

Linda S. Dodge

(Name of Person)

at ( 407 ) 644-6200

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

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

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
MAY 11 2011

**ARTICLES OF DISSOLUTION  
FOR  
A FLORIDA LIMITED LIABILITY COMPANY**

1. The name of the limited liability company is

WMC Tuscawilla, LLC

2. The date the dissolution was approved: 7/13/2005

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

Pursuant to written consent of W. Malcolm Clayton, Sole Member (copy attached).

4. **CHECK ONE:**

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

6. **CHECK ONE:**

☒ There are no suits pending against the company in any court.  
-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution :

Signature

W. Malcolm Clayton

Typed or Printed name

W. Malcolm Clayton

**Filing Fee: \$25.00**

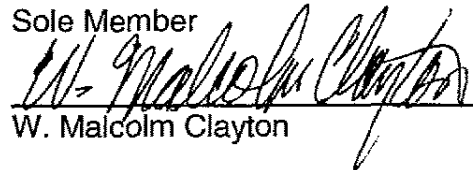
## CONSENT TO DISSOLUTION OF WMC TUSCAWILLA, LLC

The undersigned individual, being the Sole Member of WMC Tusawilla, LLC, a Florida Limited Liability Company, agrees hereby agrees and consents to the dissolution of WMC Tusawilla, LLC effective July 30, 2005.

Dated this 13<sup>th</sup> day of July, 2005.

W. MALCOLM CLAYTON,  
Sole Member

By:

  
W. Malcolm Clayton

FILED  
JUL 13 2005  
TUSCAWILLA  
SECRETARY OF STATE  
CLARKSON