

LC 70000 23941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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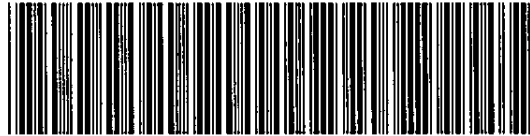
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JAN 23 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Crystal Cottages, 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:

Joseph M. Scheyd, Jr.  
(Name of Person)

Joseph M. Scheyd, Jr., P.A.  
(Firm/Company)

1221 Airport Road, Suite 209  
(Address)

Destin, Florida 32541  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph M. Scheyd, Jr. at ( 850 ) 837-1171  
(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

Crystal Cottages, LLC

2. The Articles of Organization were filed on June 25, 2003 and assigned

document number L03000023841

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)

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).

Insolvency

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

6. Signature of an authorized person or if there are no members, the signature of the person appointed as listed above to wind up the company's activities and affairs:

  
Signature

John C. Pope

Printed Name

**FILING FEE: \$25.00**

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15 JAN 12 AM 8:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA