

L03000029199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2014 APR 28 PM 4:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY - 2 2013

T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: North Florida Property Investors 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. Whitehead  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

897 Grand Rapids Blvd.  
(Address)

Naples FL 34120  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph M. Whitehead at (239) 293-9701  
(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

North Florida Property Investors LLC.

2. The Articles of Organization were filed on 08-07-2003 and assigned

document number L03000029199

3. The delayed effective date the dissolution if not effective on the date of filing:

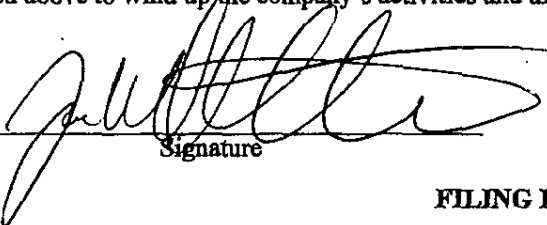
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

upon agreement of all members to  
voluntarily dissolve the Florida  
limited liability company

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 and listed above to wind up the company's activities and affairs:

  
Signature

Joseph M. Whitehead, Mgr.  
Printed Name

FILING FEE: \$25.00

**FILED**  
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