# 103000031367

`		
(Requi	estor's Name)	
(Addre	ess)	
•		
(Addre	ess)	
•	<b>,</b>	
(City/9	state/Zip/Phon	o #\
(Oily/C	nate/Zip/Filon	C #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nai	me)
,		
(Docur	ment Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fili	na Officer	
Special instructions to Fill	ng Onicer.	

Office Use Only



900040996459

09/20/04--01029--017 \*\*43.75

OF OCT -2

€" 8± 25

03/3/2/1



September 22, 2004

PAMELA DETORE 10910 SHELDON ROAD TAMPA, FL 33626

SUBJECT: ANCHOR TITLE PARTNERS, LLC

Ref. Number: L03000031367

We have received your document for ANCHOR TITLE PARTNERS, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 504A00055848

# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Anchor Title Partners, 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:	
Pamela J. Detore	
(Name of Person)	
Anchor Ditte	
(Firm/Company)	_
10910 Sheldon Road (Address)	
(Address)	
Tampo, Fr 33626	
(City/State and Zip Code)	
For further information concerning this matter, please call:	0+0
0-101 Och 813 (-79-329)	夏 子
Pamela J. Defore at 813 679-3298 (Area Code & Daytime Telephone Number) 171	
丑	
Enclosed is a check for the following amount:	#11 8: 2
□ \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)	, cu
(additional copy is chelosed) Certified copy is en	nclosed)
CERTIFIED AND DOCC	

### 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

# ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is		
Anchor Title Partners  2. The date the dissolution was approved: 9-13	ers, LLC	
2. The date the dissolution was approved: $9 - 13$	3-04	
3. A description of the occurrence that resulted in the lin section 608.441, Florida Statutes, (copy of 608.441 or The Corporation has Commenced by	n back of cover letter).	
4. CHECK ONE: All debts, obligations and liabilities of the limited liabilities of the debts, obligations and dequate provision has been made for the debts, obligations.	•	
<ol> <li>All remaining property and assets have been distribute respective rights and interests.</li> </ol>	•	
<ul> <li>6. CHECK ONE:</li> <li>There are no suits pending against the company in any OR-</li> <li>Adequate provision has been made for the satisfaction be entered against it in any pending suit.</li> </ul>		/
Signatures of the members having the same percentage the dissolution:	of membership interests necessary to appro	ove
Signature	Typed or Printed name	