

L040000 20341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2014 JAN 17 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 22 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Four Corners 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 Wiggins
(Name of Person)

Four Corners Investors LLC
(Firm/Company)

2708 N Halsted St. #5N
(Address)

Chicago IL 60614
(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph M Wiggins at (917) 509-0737
(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

Four Corners Investors LLC

2. The Articles of Organization were filed on March 16, 2004 and assigned
document number LO4000020341

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

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).

- Final tenant for rental property ended and ~~was~~ no longer
any rental properties. No further business need for
LLC by the 100% owner Joseph M Wiggins, sole
member.

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

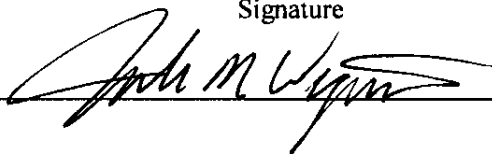
Joseph M Wiggins

2708 N Halsted St # 5N

Chicago IL 60614

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



Printed Name

Joseph M Wiggins

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA