

LO4000067102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

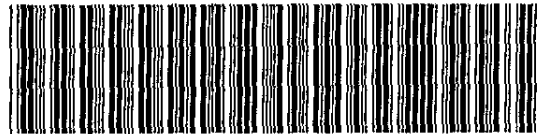
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700046139427

02/09/05--01018--001 **30.00

FILED
2005 FEB -9 PM 3:39
TALLAHASSEE, FLORIDA
CLERK OF DISTRICT COURT

W 02/14/05

CP

KEITH J. WILLIAMS, MANAGER
32618 WEKIVA PINES BLVD.
SORRENTO, FL 32776
(352) 383-6339 OFC
(352) 383-7405 FAX

EMERALD POND LLC

February 4, 2005

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

Referenced: Dissolution of LLC

Dear Sir or Madam:

Enclosed, please find transmittal letter & Articles of Dissolution for EMERALD POND LLC, a Florida Limited Liability Company.

This LLC was dissolved as of December 30, 2004. It was not needed.

Check is enclosed. Thank you.

Sincerely,



Keith J. Williams
Manager

Enclosures (3)

FILED
2005 FEB -9 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

.....

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EMERALD POND 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:

KEITH J. WILLIAMS
(Name of Person)

EMERALD POND LLC
(Firm/Company)

32618 WEKIVA PINES BLVD.
(Address)

SORRENTO, FL 32776
(City/State and Zip Code)

For further information concerning this matter, please call:

KEITH J. WILLIAMS at (352) 383-6339
(Name of Person) (Area Code & Daytime Telephone Number)

FILED
2005 FEB -9 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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

1. The name of the limited liability company is

EMERALD POND LLC

2. The date the dissolution was approved: 12-30-05

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).

LLC NOT NEEDED

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

Typed or Printed name

Keith J. Williams

KEITH J. WILLIAMS MANAGER

Rudolph Rode

RUDOLPH RODE MANAGER

FILED
2006 FEB 9 PM 3:39
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00