

LOS0000 42617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

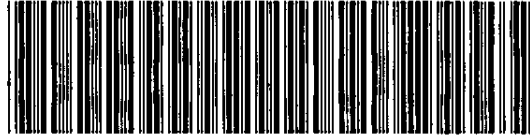
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



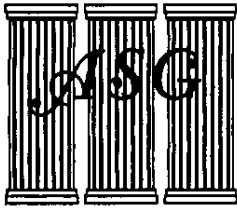
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03/10/16--01013--021 **25.00

FILED
16 MAR 10 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 11 2016

J SHIVERS



ANCHORS ♦ SMITH ♦ GRIMSLEY

A PROFESSIONAL LIMITED COMPANY
ATTORNEYS AND COUNSELORS AT LAW
909 MAR WALT DRIVE, SUITE 1014
FORT WALTON BEACH, FL 32547-6711
(850) 863-4064 (850) 862-1138 FAX (850) 664-5728 FAX
WWW.ASGLEGAL.COM

C. LEDON ANCHORS
JAMES W. GRIMSLEY
STEVEN B. BAUMAN
W. SCOTT FOSTER *
C. JEFFREY MCINNIS
RICHARD P. PETERMANN *
TIMOTHY W. SHAW

SHIRAZ A. HOSEIN
JEFFREY L. BURNS*
N. GRESHAM FOSTER
DEWEY PARKER DESTIN

WALTER J. SMITH
1929-2001

7 March 2016

* ALSO ADMITTED IN ALABAMA

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Palafox 1120, LLC - Articles of Dissolution

Dear Sir/Madam:

Enclosed you will find the Articles of Dissolution of Palafox 1120, LLC (hereinafter called the Articles of Dissolution) and Notice of Limited Liability Company Dissolution (hereinafter called the Notice of Dissolution).

Please file the Articles of Dissolution and the Notice of Dissolution in the records of the Secretary of State and return a copy to me. I have enclosed my firm's check no. 13236 in the amount of \$25.00 for the fees associated with this filing.

I am

Very truly yours,

James W. Grimsley

JWG/jcr
Enclosures: As stated above.
cc: Ann Nunn

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Palafox 1120, 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:

James W. Grimsley

(Name of Person)

Anchors Smith Grimsley, PL

(Firm/Company)

909 Mar Walt Dr. Suite 1014

(Address)

Fort Walton Beach FL 32547

(City/State and Zip Code)

For further information concerning this matter, please call:

James W. Grimsley

(Name of Person)

at (850) 863-4064

(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

Palafox 1120, LLC

2. The Articles of Organization were filed on April 29, 2005 and assigned

document number L05000042617

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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

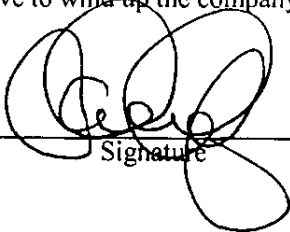
Sole Member voluntarily consents to dissolve this limited liability company due to no future business.

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

activities and affairs:

N/A

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

James W. Grimsley

Printed Name

FILING FEE: \$25.00

FILED
16 MAR 10 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Palafox 1120, LLC

Document number of Limited Liability Company is: L05000042617

Date of dissolution was: Date of filing

Description of information that must be included in a written claim:

There are no claims against this limited liability company

FILED
16 MAR 10 AM 8:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Ann Nunn

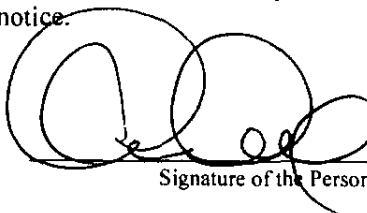
9375 Emerald Coast Pkwy. #18

Miramar Beach, FL 32550

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

James W. Grimsley

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00