

LD5000050598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

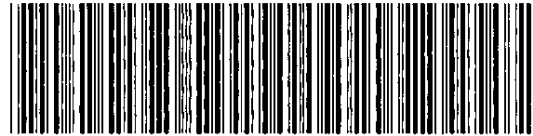
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**G. MCLEOD**

**AUG 22 2008**

**EXAMINER**



500130889225

08/22/08--01005--001 \*\*50.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
08 AUG 21 PM 12:00

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Polk Home Management 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:

Paul White  
(Name of Person)  
Polk Home Management.  
(Firm/Company)  
P.O. Box 8991  
(Address)  
Lakeland, FL. 33806  
(City/State and Zip Code)

For further information concerning this matter, please call:

Paul White at 863 709-0909  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ 30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

08 AUG 21 PM 12:00

1. The name of a limited liability company is

Polk Home Management LLC

2. The Articles of Organization were filed on \_\_\_\_\_ and assigned document number

L050000050598

3. The date the dissolution was approved: 8/13/08

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

Business closed

5. 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.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. 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

Printed Name

Melinda White  
Cameron Honeycutt

Paul White  
Melinda White  
Cameron Honeycutt

Managing Member  
Managing Member  
Registered Agent

FILING FEE: \$25.00