L05000078571

	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:				

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EXAMINER



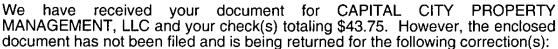
FLORIDA DEPARTMENT OF STATE Division of Corporations

August 4, 2011

WALTER L. DAVIS CAPITAL CITY PROPERTY MANAGEMENT, LLC 1891-3 CAPITAL CIRCLE NE #113 TALLAHASSEE, FL 32308

SUBJECT: CAPITAL CITY PROPERTY MANAGEMENT, LLC

Ref. Number: L05000078571



You completed the wrong form

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) 245-6043.

Letter Number: 211A00018351

Joey Bryan Regulatory Specialist II OPERTY enclosed etion(s): September 12, 2011

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



To Whom It May Concern:

During our first filing, we were notified that we completed the incorrect forms and were sent the attached forms instead. Our last day of operation was December 31, 2010. We indicated that date on our tax return and noted our 2010 tax return as the final business return.

The dissolution paperwork is signed by Walter L. Davis, the manager and majority interest holder in the company. The other member no longer lives in the United States. We have resolved all business affairs related to the business. However, we are maintaining our mailing address long enough to receive our final certificate of status.

You are still in possession of our check in the amount of \$43.75 from the first filing attempt, so we are not including another check. The price appears to be lower than we originally paid so we should receive a refund of \$13.75. Please contact me at my direct number (850-443-8269) if there are any questions related to the dissolution of this business. Thank you for your assistance in this matter.

For Capital City Property Management,

Walter L. Davis

Manager

COVER LETTER

то:		ion Section of Corporati	ons								
SUBJEC	CT: <u>(</u>	APITAL	City	PROPERT (Name of I	Y Manu Imited Liab	GEMENT	uc			-	
The encl	losed Arti	cles of Disso	lution and	l fee(s) are su	ibmitted for	filing.					
Please re	eturn all c	orresponden	ce concern	ning this matt	er to the fol	owing:			ES S		
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	_	TA	LAHAS	SEE FL	3235 ty/State and Z	B ip Code)	·		_		
For furth	ner inform	 nation concer	ning this r	natter, please	call:			:			
	<u></u> w	ALTER L.	DAVIS me of Perso	on)	a	(<u>850</u>) (Area Code &	443-	B269 elephone Nu	mber)	_	
Enclosed	is a check	for the follow	ing amount	:							
\$25.00	Filing Fee		30.00 Filir Certificat	ng Fce & le of Status	Ce	00 Filing Fee & tified Copy ditional copy is end	elosed)	\$60.00 F Certificate of Certified Co (additional	of Status & opy	losed)	
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327				STREET Registrat Division Clifton B	ion Section of Corpo	on	RESS:				

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is CAPITAL CITY PROPERTY MANAGEM	ENT LLC
2. The Articles of Organization were filed on APAU しゆちゆゆゆつ8571	Da :
3. The date the dissolution was approved:	nber 31, 2010
4. A description of occurrence that resulted in the limi 608.441, Florida Statutes, (copy 608.441 on back of	ted liability company's dissolution pursuant to section over letter).
THE COMPANY WAS DISSOLVED DI	DRING A MEETING AND UPON
WRITTEN CONSUMT OF ALL OF TH	te Members of the Limited
LIABILITY COUNTARY.	
OR-Adequate provision has been made for the confidence of the conf	imited liability company have been paid or discharged. debts, obligations and liabilities pursuant to s. 608.4421. uted among its members in accordance with their respective pany in any court. satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of	membership interests necessary to approve the dissolution:
Signature	Printed Name
Wate Daws	WACTER L. DAVIS
)	

FILING FEE: \$25.00