

L05000121541

(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:

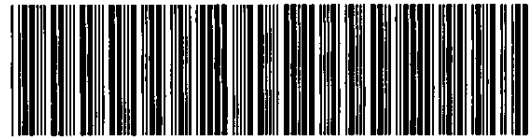
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JAN 23 2012

EXAMINER



000217360380

01/20/12--01020--008 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 20 AM 11:08

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Summerford Property Management, LLC
(Name of Limited Liability Company)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JAN 20 AM 11:08

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jaron Summerford, Owner
(Name of Person)

Summerford Property Management, LLC
(Firm/Company)

1107 SW 11th DR
(Address)

Oleechabee, FL 34974
(City/State and Zip Code)

For further information concerning this matter, please call:

Jaron Summerford at 803, 634-7771
(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 CORPORATIONS
12 JAN 20 AM 11:08

1. The name of a limited liability company is

Summertord Property management, LLC

2. The Articles of Organization were filed on 12/21/05 and assigned document number

L05000121541

3. The date the dissolution was approved: 12/31/11

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).

Closed Business

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

[Signature]

Printed Name

Jason Summertord

FILING FEE: \$25.00