

L06000020933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

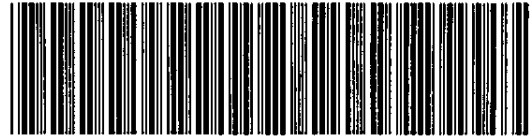
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2015 APR -2 PM 4:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ADR
1/15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TCB Partners 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:

c/o Genna Rubolino

(Name of Person)

Proskauer Rose LLP

(Firm/Company)

2255 Glades Road, #421 Atrium

(Address)

Boca Raton, FL 33433

(City/State and Zip Code)

For further information concerning this matter, please call:

Genna Rubolino

(Name of Person)

561

995-4773

at (

(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

FILED

2015 APR -2 PM 4: 24

1. The name of a limited liability company is
TCB Partners LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. The Articles of Organization were filed on 02/24/2006

and assigned

document number L06000020933

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)

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).

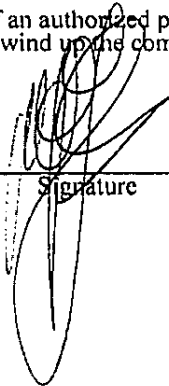
sale of LLC assets

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Manager and Registered Agent: Mark B. Gerber

5910 Star Grass Lane

Naples, FL 34116

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

Mark Gerber

Printed Name

FILING FEE: \$25.00