

L06000021995

(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



300175125493

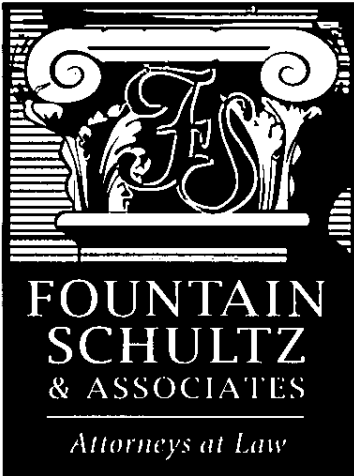
04/12/10--01007--026 **25.00

FILED
10 APR 12 AM 7:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

APR 13 2009

EXAMINER



KENNETH R. FOUNTAIN
KERRY ANNE SCHULTZ
SCOTT C. BRIDGFORD

April 8, 2010

VIA REGULAR U.S. MAIL

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

**RE: Articles of Dissolution for a Limited Liability Company
C-Housesolutions, L.L.C.**

FILED
10 APR 12 AM 7:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

Enclosed please find the following instruments:

1. Original and one copy of the Articles of Dissolution of C-Housesolutions, L.L.C.; and
2. Check # 1538 in the amount of \$25.00 for filing the Articles of Dissolution.

Please return a filed copy to me in the enclosed pre-addressed, stamped envelope.

Should you have any questions, please advise. Thank you for your assistance in this matter.

Sincerely,
Fountain, Schultz & Associates, P.L.

Kerry Anne Schultz, Esquire

KAS: mae
Enclosures

2045 FOUNTAIN PROFESSIONAL CT.
SUITE A
NAVARRE, FLORIDA 32566
TEL: (850) 939-3535
FAX: (850) 939-3539

SANTA ROSA BEACH
TEL: (850) 622-2700
FAX: (850) 622-2722

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C-HOUSESOLUTIONS, L.L.C.
(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:

Kerry Anne Schultz, Esquire
(Name of Person)

Fountain, Schultz & Associates, P.L.
(Firm/Company)

2045 Fountain Professional Court, Suite A
(Address)

Navarre, Florida 32566
(City/State and Zip Code)

FILED
10 APR 12 AM 7:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Kerry Anne Schultz at (850) 939-3535
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> 30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
10 APR 12 AM 7:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
C-HOUSESOLUTIONS, L.L.C.

2. The Articles of Organization were filed on February 28, 2006 and assigned document number
L06000021995

3. The date the dissolution was approved: March 1, 2010

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).

(b) Upon the occurrence of events specified in the articles of organization or operating agreement

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

Bobby W. Chavers

Bobby W. Chavers

FILING FEE: \$25.00