

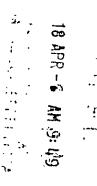
(Re	questor's Name)	
(Ad	dress)	
\	,	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300311368203

04/06/18--01029--015 **55.00



Y SULKER APR 0 9 2018

COVER LETTER

TO:

Registration Section Division of Corporations

SHBJECT

Harbor, 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:

Tommie Cummings (Name of Person) Kassouf & Co (Firm/Company) 2101 Highland Ave S Ste 300 (Address) Birmingham, AL 35205

(City/State and Zip Code)

For further information concerning this matter, please call:

Tommie Cummings at (205) 443-2500 (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

1.	The name of a limited liability company is			
	Harbor, LLC			
2.	The Articles of Organization were filed on 03/17/2006 and assigned			
	document number L06000028614			
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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.			
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).			
	No longer in business.			
	ů.			
5.	If there are no members, enter the name and address of the person appointed to wind up the companyes activities and affairs:			
	<u>₩</u>			
				
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ed above to wind up the company's activities and affairs:			
	DEU 10 Jim Elder Signature Printed Name			
_	Signature Printed Name			

FILING FEE: \$25.00