

LD6000031667

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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2015 AUG 13 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. Gulligan AUG 14 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lauer Accomodation Title, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Raymond D. Lauer

Name of Person

Lauer Accomodation Title, LLC

Firm/Company

948 Springer Drive

Address

Griffin, GA. 30224

City/State and Zip Code

debray3@sbcglobal.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Raymond D. Lauer

Name of Person

at (770) 5300458

Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Laver Accommodation Title, 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:

Raymond D. Laver
(Name of Person)

Laver Accommodation Title, LLC
(Firm/Company)

948 Springer Drive
(Address)

Griffin GA. 30224
(City/State and Zip Code)

For further information concerning this matter, please call:

Raymond D. Laver at (770) 530-0458
(Name of Person) (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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 AUG 13 PM 3: 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 29, 2015

RAYMOND D. LAUER
948 SPRINGER DRIVE
GRIFFIN, GA 30224

SUBJECT: LAUER ACCOMMODATION TITLE, LLC
Ref. Number: L06000031667

Mailing address

PO Box 1583

Griffin, GA. 30224

We have received your document for LAUER ACCOMMODATION TITLE, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Statement of Termination may be filed after the limited liability company has completed winding up and after a voluntary dissolution has been filed with this office. See section 605.0709(7), Florida Statutes for reference.

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) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 515A00013580

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2015 AUG 13 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Lever Accommodation Title, LLC

2. The Articles of Organization were filed on March 24, 2006 and assigned

document number LC06000031667

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 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Sold the property on June 12, 2014

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: _____

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

Raymond D. Lever
Printed Name

FILING FEE: \$25.00