

L06000044345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entry Name)

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FALL ARIZONA 1100007

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DEC 20 2019



115 N. CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 12/18/2019

Name: Merritt Walker

Reference #: 1166287

Entity Name: CDC TOWN CENTRE, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other \_\_\_\_\_

Authorized Amount: \$25

Signature: *mm*

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CDC TOWN CENTRE, 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:

Milena Vorndran - Paralegal

\_\_\_\_\_  
(Name of Person)

Bond, Schoeneck & King, PLLC

\_\_\_\_\_  
(Firm/Company)

200 Delaware Ave, Suite 900

\_\_\_\_\_  
(Address)

Buffalo, NY 14202

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Milena Vorndran

\_\_\_\_\_  
(Name of Person)

716

at (

416-7065

) \_\_\_\_\_  
(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED  
2019 DEC 18 PM 1:23  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
CDC TOWN CENTRE, LLC

2. The Articles of Organization were filed on 4/26/2006 and assigned  
document number 1.06000044345

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).  
By unanimous written consent of all the members to dissolve the limited liability company.

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:

William B. Stark Jr.  
Signature

William B. Stark Jr.  
Printed Name

FILING FEE: \$25.00