

L07000024664

(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:

Sign

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600283594246

03/21/16--01032--003 \*\*25.00

CLERK OF DISTRICT CLERK  
DALLAS, TEXAS 75201

2016 APR -5 AM 11:28

FILED

K. GALT  
EXAMINER

APR -8 -



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
2016 APR -5 AM 11:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

March 24, 2016

DANIEL KUMMER  
158 OLD WINKLE POINT  
NORTHPORT, NY 11768

SUBJECT: OFFICE CITY WAREHOUSE - RED ROCK PARTNERS III, L.L.C.  
Ref. Number: L07000024664

We have received your document for OFFICE CITY WAREHOUSE - RED ROCK PARTNERS III, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 416A00006133

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** OFFICE CITY WAREHOUSE - RED ROCK PARTNERS III, 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:

**DANIEL KUMMER**

(Name of Person)

(Firm/Company)

**158 OLD WINKLE POINT**

(Address)

**NORTHPORT, NY 11768**

(City/State and Zip Code)

For further information concerning this matter, please call:

**DAN KUMMER**

(Name of Person)

at **631 754-1479**

(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

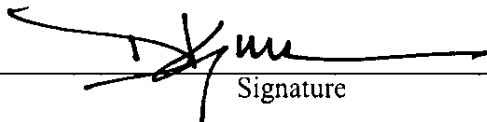
**STREET/COURIER ADDRESS:**

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

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

FILED  
2016 APR -5 AM 11:28  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
OFFICE CITY WAREHOUSE - RED ROCK PARTNERS III, L.L.C.
2. The Articles of Organization were filed on 03/05/2007 and assigned  
document number L07000024664
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).  
OUT OF BUSINESS  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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

DANIEL KUMMER

\_\_\_\_\_  
Printed Name

**FILING FEE: \$25.00**