607000032051

	(Requestor's Name)
	(Address)
	(Address)
_	(City/State/Zip/Phone #)
PICK-L	P
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
	Office Hsa Only



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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

TG GP, 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:

Linda G Kassof

(Name of Person)

Taurus Investment Holdings

(Firm/Company)

610 N Wymore Road, Suite 200

(Address)

Maitland, FL 32751

(City/State and Zip Code)

For further information concerning this matter, please call:

∐inda G Kassof

(Name of Person)

., 407

539-2310

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



.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

١.	The nam	e of a limited liabil	ity company is					
	TG GP, I	LC		=			.•	
2.	The Arti	eles of Organization	1 were filed on $\frac{03/23}{1}$	3/2007	and assigned			
	documer	t number <u>L070000</u> 3	2081					
3.	Note: II	yed 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) the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be the document's effective date on the Department of State's records.						
	A descri 605.0707	ption of occurrence Florida Statutes, (that resulted in the I copy 605.0707 on ba	imited liability compa	my's dissolution pursua	nt to secti	ion	
	The under	lying properties were	sold.					
5	If there s	re no mambars, ent	er the name and add	ress of the person app	ointed to wind up the co	ompany's		
		and affairs:	Linda G Kassof	ress of the person app	omed to while up the ex	Jinpany s	10 20 1	
			Taurus Investment H	foldings				
			610 N Wymore Rd S	Suite 200		<u>:</u>	ာ သ	
			Maitland, FL 32751				0	
6. Iis	Signatur ted above	e of an authorized p to wind up the con	erson or if there are npany's activities and	no members, the signa d affairs:	ature of the person appo	inted and	i	
/	and			Linda G Kassof				
<u></u>		Signature			Printed Name			
		Ī						

FILING FEE: \$25.00