L07000065558

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
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TALLAHASSEE, FLORIDA

1. Sideres JAN 1 3 2015

COVER LETTER

SUBJECT: DORCHUCK RESIDENTIAL PROPERTIES, LLC	The enclosed Articles of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Felecia Dorchuck (Name of Person) (Firm/Company) P.O. Box 698 (Address) Marianna, FL 32447	10:	Division of Corporations	
(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: Felecia Dorchuck (Name of Person) (Firm/Company)	(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: Felecia Dorchuck (Name of Person) (Firm/Company) P.O. Box 698 (Address) Marianna, FL 32447	SUBJE	DORCHUCK RESIDENTIAL PROPERTIES, LLC	
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(Firm/Company)	P.O. Box 698 (Address) Marianna, FL 32447		Felecia Dorchuck	
	P.O. Box 698 (Address) Marianna, FL 32447		(Name of Person)	
P.O. Box 698	(Address) Marianna, FL 32447		(Firm/Company)	
	Marianna, FL 32447		P.O. Box 698	
(Address)			(Address)	
Marianna, FL 32447			Marianna, FL 32447	
(City/State and Zip Code)	(City/State and Zip Code)		(City/State and Zip Code)	
For further information concerning this matter, please call:	For further information concerning this matter, please call:	For furt	ther information concerning this matter, please call:	
	Felecia Dorchuck 850 482-5079		at ()	
at ()	(Name of Person) (Area Code & Daytime Telephone Number)		(Name of Person) (Area Code & Daytime Telephone Number)	

MAILING ADDRESS:

\$25.00 Filing Fee and Certificate of Dissolution

Enclosed is a check for the following amount:

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

₹ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited	DORCHUCK RESIL	DENTIAL PROP	ERTIES, LLC	•
2. The Articles of Organ	nization were filed on	June 22, 200	7 and assig	ned
document number	L07000065558			
. The delayed effective	date the dissolution if no feetive date cannot be prior to	ot effective on the d or more than 90 days la	ate of filing:	eceived for filing)
. A description of occu 605.0707, Florida Star	rrence that resulted in the tutes, (copy 605.0707 on	e limited liability co back cover letter).	mpany's dissolution p	oursuant to section
	The consent	of all the memb	ers.	
If there are no member activities and affairs:	ers, enter the name and ad	ldress of the person	appointed to wind up	the company's
			 	
		<u> </u>		
. Signature of an autho sted above to wind up t	rized person or if there ar he company's activities a	re no members, the and affairs:	signature of the persor	appointed and
Teleai	Du chuck_		Felecia Dorchuck	14 DEC SECRE I
Signa	Ture	NG EDE #25.00	Printed Name	JARY SSE
	FILI	NG FEE: \$25.00		
				2: 1 SIA LOR