

**L0700008211**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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APR 16 2010

**EXAMINER**

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**FILED**  
10 APR 14 PM 1:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CHILCO HOMES, 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:

COLEMAN, SHIRLEY D

(Name of Person)

(Firm/Company)

1583 EAST SILVER STAR ROAD #231

(Address)

OCOE FL 34761 US

(City/State and Zip Code)

For further information concerning this matter, please call:

COLEMAN, SHIRLEY D

(Name of Person)

at ( 407 ) 656-0458

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



30.00 Filing Fee &  
Certificate of Status



\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)



\$60.00 Filing Fee,  
Certificate of Status &  
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

March 31, 2010

SHIRLEY D. COLEMAN  
1583 EAST SILVER STAR ROAD, #231  
OCOOEE, FL 34761

SUBJECT: CHILCO HOMES, LLC  
Ref. Number: L07000082111

We have received your document for CHILCO HOMES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

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) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 910A00007935

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

1. The name of a limited liability company is  
**CHILCO HOMES, LLC**

2. The Articles of Organization were filed on **08/10/2007** and assigned document number  
**L07000082111**

3. The date the dissolution was approved: **12/31/2009**

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

*Not profitable enough to meet our needs.*

**5. CHECK ONE:**

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

**7. CHECK ONE:**

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

*Shirley A. Adams*  
*Paula Adams*

Printed Name

**Managing Member**

**Managing Member**

**FILED**  
**10 APR 14 PM 1:57**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**FILING FEE: \$25.00**