

LOT 000092775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

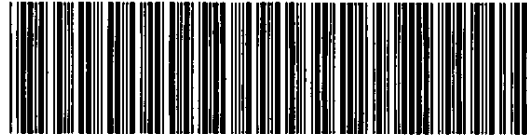
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800258399708

04/02/14--01014--021 \*\*25.00

FILED  
2014 APR - 2 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR - 4 2014

T CLINE

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Legacy5,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:

Karen Fillingim

(Name of Person)

Legacy5,LLC

(Firm/Company)

521 N. Grande View Trail

(Address)

Maylene, AL 35114

(City/State and Zip Code)

For further information concerning this matter, please call:

Karen Fillingim

(Name of Person)

at ( 205 ) 229-0100

(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 APR -2 AM 10:09

FILED

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

1. The name of a limited liability company is  
Legacy5, LLC
2. The Articles of Organization were filed on September 11, 2007 and assigned  
document number L07000092775
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)
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).  
Reason for dissolution per statute 608.441 Sec1C, "written consent of all members  
of the LLC." This LLC was never in operation nor conducted any business  
whatsoever since created in September 2007.
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

Karen Fillingim

Printed Name

**FILING FEE: \$25.00**

2014 APR -2 AM 10:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

March 31, 2014

Florida Department of State  
Division of Corporations

Member One:

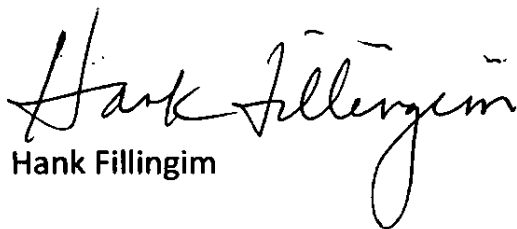
I, Karen Fillingim, consent to the dissolution of Legacy5, LLC.

A handwritten signature in black ink that reads "Karen Fillingim". The signature is stylized with a large, looped "K" and a cursive "Fillingim".

Karen Fillingim

Member Two:

I, Hank Fillingim, consent to the dissolution of Legacy5, LLC.

A handwritten signature in black ink that reads "Hank Fillingim". The signature is written in a cursive style with a large, looped "H" and a cursive "Fillingim".

Hank Fillingim

FILED  
2014 APR -2 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA