

LO7000123199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

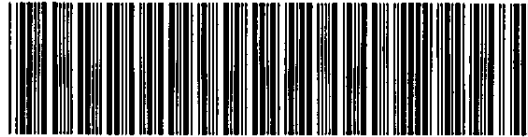
(Business Entity Name)

(Document Number)

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

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2015 MAR -6 AM 4:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 16 2015  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE CONDO CURE 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:

ERIC HOWELL

(Name of Person)

HSG ACCOUNTING

(Firm/Company)

2012 LIENBY AVENUE SUITE A

(Address)

PANAMA CITY, FL 32405

(City/State and Zip Code)

For further information concerning this matter, please call:

ERIC HOWELL

(Name of Person)

850

215-3093

at ( )

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 2, 2015

ERIC HOWELL  
HSG ACCOUNTING  
2012 LIENBY AVENUE SUITE A  
PANAMA CITY, FL 32405

SUBJECT: THE CONDO CURE LLC  
Ref. Number: L07000123199

We have received your document for THE CONDO CURE 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):

The effective date must be specific and cannot be prior to the date of filing.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 815A00002054

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

1. The name of a limited liability company is  
THE CONDO CURE LLC
2. The Articles of Organization were filed on 1/1/2008 and assigned  
document number L07000123199
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).  
CHANGE IN OWNERSHIP  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: MAUREEN NIELAND  
10517 FRONT BEACH RD. #105  
PANAMA CITY BEACH, FL 32407  
\_\_\_\_\_
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:

Maureen Nieland  
Signature

MAUREEN NIELAND  
Printed Name

**FILING FEE: \$25.00**

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA