

LOS 006021115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

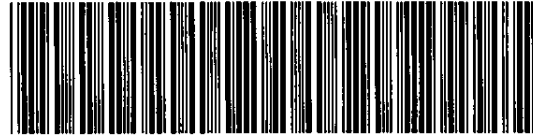
(Business Entity Name)

(Document Number)

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

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2014 FEB 10 PM 3:03  
STATE OF TEXAS  
CLERK OF COURTS

FEB 11 2014  
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Schaffer Groves, 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:

Henry Schaffer  
(Name of Person)  
Schaffer Groves, LLC  
(Firm/Company)  
90 Punnington Rd  
(Address)  
Petaluma CA 94952  
(City/State and Zip Code)

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2014 FEB 10 PM 3:04

For further information concerning this matter, please call:

Henry Schaffer (Name of Person) at ( 707 ) 765 6823  
(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

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

1. The name of a limited liability company is

Schaffer Groves, LLC

2. The Articles of Organization were filed on Feb 27, 2008 and assigned  
document number 208000021115

3. The delayed effective date the dissolution if not effective on the date of 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).

Sale of agricultural real estate

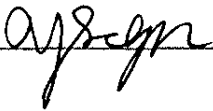
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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CLERK OF COUNTY OF DADE  
STATE OF FLORIDA

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

Printed Name



Henry Schaffer

**FILING FEE: \$25.00**