

LO8000063335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

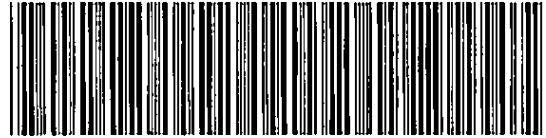
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 NOV -5 PM 3:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

NOV. 20, 2018

Amr Diss/ais

NOV 20 2018

L. BRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

Cedar Gulf Management, LLC

SUBJECT: _____
(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:

Mark A. Nielsen

(Name of Person)

(Firm/Company)

10680 Glen Lakes Drive

(Address)

Estero, FL 34135-7231

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Nielsen

262

510-3401

(Name of Person) 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

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

EFFECTIVE DATE

NOV 20, 2018

1. The name of a limited liability company is
Cedar Gulf Management, LLC

2. The Articles of Organization were filed on June 27, 2008 and assigned
document number 1.08000063335

3. The delayed effective date the dissolution if not effective on the date of filing: November 20, 2018
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

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).
No longer having any activity.

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

Mark A. Nielsen

10680 Glen Lakes Drive

Hestero, FL 34135-7231

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:

Mark Nielsen
Signature

Mark A. Nielsen

Printed Name

FILING FEE: \$25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2018 NOV -5 PM 3:48

FILED