

L070000076517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

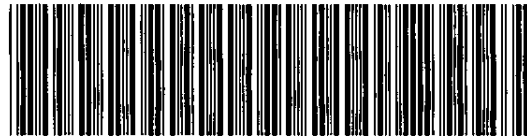
(Business Entity Name)

(Document Number)

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

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2014 JAN 23 PM 1:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 28 2013

T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Harbor Counseling Services, 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:

Frederick Ropke, II  
(Name of Person)

Halcyon Management Group, Inc.  
(Firm/Company)

3596 Tamiami Trail, Suite 205  
(Address)

Port Charlotte, FL 33952  
(City/State and Zip Code)

For further information concerning this matter, please call:

Barry Wyrick at ( 941 ) 255-5900  
(Name of Person) (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

Harbor Counseling Services, LLC

2. The Articles of Organization were filed on 08/08/2008 and assigned

document number L08000076517

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).

The managing member, Frederick Ropke, IV, has transferred all  
activities of the company to Helcyon Management Group, Inc.,  
an S-Corporation registered to Mr. Ropke in the state of Florida.  
Mr. Ropke wishes to dissolve the LLC

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

Printed Name

F. W. Ropke, IV

Frederick Ropke, IV

**FILING FEE: \$25.00**

**FILED**  
**2014 JAN 23 PM 1:39**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**