

L08000087819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

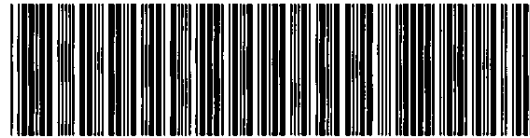
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/24/14 --01040--017 **55.00

FILED
MAR 26 2014
BOSTON
MASS. SEC. STATE

B. BOSTICK

MAR 26 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **BEARCON MANAGEMENT, 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:

Rebecca Stevens

(Name of Person)

Bearcon Management, LLC

(Firm/Company)

231 Koolabrew Drive NW

(Address)

Calabash, NC 28467

(City/State and Zip Code)

For further information concerning this matter, please call:

Rebecca Stevens

(Name of Person)

at **910 579-7900**

(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

BEARCON MANAGEMENT, LLC

2. The Articles of Organization were filed on September 15, 2008 and assigned
document number L08000087819

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).

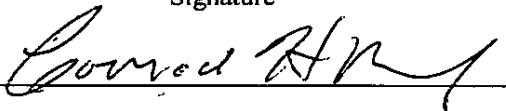
Operations were closed by Florida Department of Law Enforcement (FDLE).

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



Conrad Rowe

FILING FEE: \$25.00

2008 SEP 24 PM 5:48

FILED