

U08000112356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

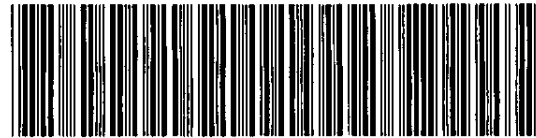
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATE
15 JAN 20 PM 1:06
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

APPROVED
AND
FILED
15 JAN 20 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 20 2015
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lea Forrest 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:

Theresa Hindsee
(Name of Person)
Lea Forrest LLC
(Firm/Company)
166 Turpin Dr
(Address)
Panacea FL 32346
(City/State and Zip Code)

For further information concerning this matter, please call:

Theresa Hindsee at (850) 510-2104
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JAN 20 PM 1:09

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

1. The name of a limited liability company is

Lea Forest LLC

2. The Articles of Organization were filed on 12-11-2008 and assigned

document number 108000112356

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).

The business has closed

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

Theresa Hinchey

1661 Tarpine Dr

Lawrence FL 32346

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JAN 20 PM 1:09

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AND
FILED

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:

Theresa L Hinchey
Signature

Theresa L. Hinchey
Printed Name

FILING FEE: \$25.00