L0900029591

(Requ	lestor's Name)	
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Certified Copies	Certificates	of Status
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FILED 2015 OCT -5 PM 2: 06 SLUKETARY OF STATE TALLAHASSEE, FLORIDA

> k.saly examiner DCT -7 2015

COVER LETTER

TO: **Registration Section Division of Corporations**

Wares Creek ALF Operating LLC (Name of Limited Liability Company) SUBJECT:

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven F. Schroeder (Name of Person) Blue Cardinal Holdings LLC (Firm/Company) 4700 leth Street South (Address) Arlington, VA 22204 (City/State and Zip Code)

For further information concerning this matter, please call:

Steven F. Schroeder at (703), 408-2663 (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	FILED 2015 OCT -5 PM 2:06			
1. The name of a limited liability company is Wares Creek ALF Operating LLC	SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. The Articles of Organization were filed on <u>March 24, 2009</u> and assig document number <u>L09000029591</u>	gned			
3. The delayed effective date the dissolution if not effective on the date of filing:	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 Company has ceased operations and does not have any assets.				
5. If there are no members, enter the name and address of the person appointed to wind up activities and affairs: <u>Steven Fi Schroeder</u> <u>4700 (eth Street South</u> <u>Arlington</u> , VA 22204				
6. Signature of an authorized person or if there are no members, the signature of the person listed above to wind up the company's activities and affairs:	on appointed and			

/ Signature

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Steven F. Schroeder

Printed Name

FILING FEE: \$25.00