L'09000036214

| (Reque | estor's Name | . |
|-----------------------------------------|---------------|--------------|
| (Address) | | |
| (Addre | ss) | <u>.</u> |
| (City/S | tate/Zip/Phor | ne #) |
| PICK-UP | WAIT | MAIL |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies | Certificate | es of Status |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | | |

Office Use Only



000215144430

12/16/11--01018--007 **25.00

VILL DEC | 6 PM 2: 88
SECRETARY OF STATE
ALLAHASSEE, FLORID!

C. LEWIS

DEC 1 9 2011

EXAMINER

COVER LETTER

| TO: Registratio | on Section f Corporations |
|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJECT: | (Name of Limited Liability Company) |
| The enclosed Article | les of Dissolution and fee(s) are submitted for filing. |
| Please return all cor | rrespondence concerning this matter to the following: |
| | Katie Haroman (Name of Person) |
| | Crostand 11.C |
| | (Firm/Company) 59100 Frigulium Rd. Swite 200 |
| | S960 Fairview Rd, Svite 200 (Address) Charlotte NC 28210 (City/State and Zip Code) |
| | (City/State and Zip Code) |
| For further informat | tion concerning this matter, please call: |
| , | (Name of Person) at (704) 561 - 5263 (Area Code & Daytime Telephone Number) |
| Enclosed is a check fo | or the following amount: 30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certificate of Status (additional copy is enclosed) 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

2011 DEC 16 PM 2: 58

| 1. The name of a limited liability company is Costand Flor Del Mar, LLC | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| 2. The Articles of Organization were filed on04 14 2009 | and assigned document number |
| 3. The date the dissolution was approved: 12 12 201 4. A description of occurrence that resulted in the limited liability of 608.441, Florida Statutes, (copy 608.441 on back cover letter). 1008.445 (b) - Cessa From of Business of Business | ompany's dissolution pursuant to section activity per operating agreement |
| 5. CHECK ONE: All debts, obligations and liabilities of the limited liabilities of the limited liabilities on the debts, obligation. 6. All remaining property and assets have been distributed among it rights and interests. 7. CHECK ONE: There are no suits pending against the company in any control of the company in any pending suit. | ions and liabilities pursuant to s. 608.4421. s members in accordance with their respective |
| Signatures of the members having the same percentage of membership | interests necessary to approve the dissolution: |
| Signature By: Crossand, 4C, its Manager & Sole Member Cattlettall | Printed Name Cathleen Hardman, Vice President |
| | |
| | |

FILING FEE: \$25.00