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From:

Account Name : CAPITOL SERVICES, INC.

Account Number: I20160000017 : (855)498-5500 Phone

Fax Number : (800) 432-3622

LLC DISSOLUTION OR WITHDRAWAL TF LEGACY, LLC

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December 4, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

TF LEGACY, LLC 1432 ST. JOHNS BLUFF ROAD JACKSONVILLE, FL 32225

SUBJECT: TF LEGACY, LLC

REF: L09000085167

\*\*\*PLEASE PROVIDE ORIGINAL SUBMISSION DATE OF 12/3/18\*\*\*

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Agnes Lunt Regulatory Specialist III FAX Aud. #: E18000343684 Letter Number: 118A00024793 2018 DEC - 3 AM 10: 10

IT.

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The Articles of Organ	ization were filed on	and assigned
document number Los	0000085167	
Note: If the date insert	date the dissolution if not effective on the difective date cannot be prior to or more than 90 days hed in this block does not meet the applicable state of effective date on the Department of State's reco	tutory filing requirements, this date will no
A description of occur 505.0707, Florida State	rence that resulted in the limited liability course, (copy 605.0707 on back cover letter).	ompany's dissolution pursuant to secti
All members and man	agers voted to dissolve the entity.	
		<del></del>
		SAI
	rs, enter the name and address of the person	i appointed to wind up the company's
activities and affairs:	<del></del>	
Signature of an authoried above to wind up to	rized person or if there are no members, the ne company's activities and affairs:	signature of the person appointed and
1/10-	- ,	
t. M.		Fame Williams
MINIC	ure	KANK MILSON

FILING FEE: \$25.00