

Dec 10, 2015 2:11 PM FAX WACKEN DUNGEY 772-283-4637 No. 4261215
L09000098961

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000292203 3)))



H150002922033ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : FOX, WACKEEN, DUNGEY, SEELEY, SWEET, BEARD & S
Account Number : 076247002541
Phone : (772) 287-4444
Fax Number : (772) 283-4637

**LLC DISSOLUTION OR WITHDRAWAL
FORT PIERCE PROPERTIES, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$60.00

RECEIVED

15 DEC 10 PM 3:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 DEC 10 A 8:35

FILED

DEC 11 2015

Dec. 10. 2015 2:31PM

FOX WACKEEN DUNGEY 772-283-4637

H15000292203 No. 4276 P. 2

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FORT PIERCE PROPERTIES, 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:

RAYMOND G. ROBISON

(Name of Person)

FOX, WACKEEN, DUNGEY, ET AL

(Firm/Company)

3473 SE WILLOUGHBY BLVD.

(Address)

STUART, FL 34994

(City/State and Zip Code)

For further information concerning this matter, please call:

RAYMOND G. ROBISON at 772 287-4444

(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**

1. The name of a limited liability company is
FORT PIERCE PROPERTIES, LLC

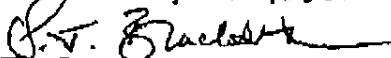
2. The Articles of Organization were filed on October 14, 2009 and assigned
document number 109060098961

3. The delayed effective date the dissolution if not effective on the date of filing: DECEMBER 31, 2015
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

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).
CONSENT OF ALL THE MEMBERS

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

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

STEPHEN BLACKBURN, MANAGER
Printed Name

FILING FEE: \$25.00

2015 DEC 10 A 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: FORT PIERCE PROPERTIES, LLC

Document number of Limited Liability Company is: L09000098961

Date of dissolution was: DECEMBER 31, 2015

Description of information that must be included in a written claim:

NAME AND ADDRESS OF CLAIMANT.

AMOUNT OF CLAIM.

WHETHER CLAIM IS SECURED OR CONTINGENT.

DETAILED DESCRIPTION OF TYPE OF CLAIM AND DATE CLAIM

AROSE.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

RAYMOND G. ROBISON

FOX, WACKEEN, DUNGEY ET AL

3473 SE WILLOUGHBY BLVD.

STUART, FL 34994

2015 DEC 10 A 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

STEPHEN BLACKBURN

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00