

L10000007776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2014 MAR 24 P 5:38  
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MAR 24 2014

B. BOSTICK

MAR 26 2014

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FREE ENTRY CLAY COUNTY, 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:

Rebecca Stevens

(Name of Person)

Free Entry Clay County, LLC

(Firm/Company)

231 Koolabrew Drive NW

(Address)

Calabash, NC 28467

(City/State and Zip Code)

For further information concerning this matter, please call:

Rebecca Stevens

(Name of Person)

at 910 579-7900

(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

FREE ENTRY CLAY COUNTY, LLC

2. The Articles of Organization were filed on January 21, 2010 and assigned  
document number L10000007776

3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_

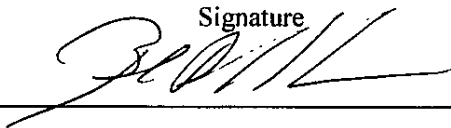
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section  
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Operations were closed by Florida Department of Law Enforcement (FDLE).

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

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



Printed Name

Brad D. Skidmore

**FILING FEE: \$25.00**

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CLAY COUNTY  
FLORIDA