

L 10000030953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

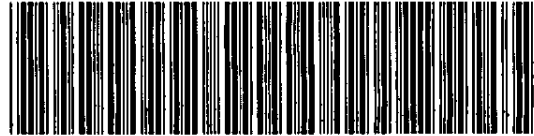
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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100283055391

03/22/16--01003--022 **25.00

FILED

RECEIVED

2016 MAR 21 PM 4:07

2016 MAR 21 AM 8:17

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

MAR 22

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

TSHS Holdings, 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:

Paula Tighe
(Name of Person)

Earnest Tighe Law Firm, PA
(Firm/Company)

103 N.E. 4th Street
(Address)

Fort Lauderdale, FL 33301
(City/State and Zip Code)

For further information concerning this matter, please call:

Paula Tighe
(Name of Person)

at (954) 525-5644
(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 MAR 21 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

TSHS Holdings, LLC

2. The Articles of Organization were filed on 3/19/10 and assigned

document number

210000030953

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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).

No longer active

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

Harriet Stone

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:

Harriet Stone
Signature

Harriet Stone
Printed Name

FILING FEE: \$25.00