

L10000034069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

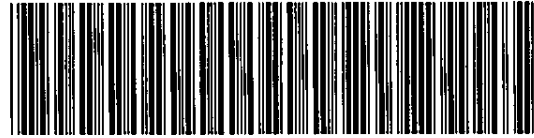
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2014 JAN 23 PM 1:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 28 2013

T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Lighthouse Supported Housing, 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:

Frederick Ropke, II  
(Name of Person)

Halcyon Management Group, Inc.  
(Firm/Company)

3596 Tamiami Trail, Suite 205  
(Address)

Port Charlotte, FL 33952  
(City/State and Zip Code)

For further information concerning this matter, please call:

Barry Wyrick at ( 941 ) 255-5900  
(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

Lighthouse Supported Housing, LLC

2. The Articles of Organization were filed on 03/29/2010 and assigned  
document number L10000034069

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).

This company has ceased all operations and all business affairs  
have been concluded. Frederick Ropke, II, the managing  
member and only member wishes to dissolve the LLC.

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

F. W. Ropke, II

Printed Name

Frederick Ropke, II

**FILING FEE: \$25.00**

**FILED**  
**2014 JAN 23 PM 1:31**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**