# 110000165456

(Requestor's Name)					
(Address)					
(Address)					
(Ci	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL .			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate	s of Status			
Special Instructions to Filing Officer:					

-Office Use Only



100267063651

12/05/14--01034--018 \*\*25.00

FILED
FILED

# **COVER LETTER**

JBJECT: _	Corner Lot Investments LLC (Name of Limite	ed Liability Company)	
he enclosed A	Articles of Dissolution and fee(s) are submitte	ed for filing.	
lease return a	Ill correspondence concerning this matter to t	he following:	
	Pate Foshee		
	(Nam	e of Person)	
	Colonial Capital LLC		
	(Firm	n/Company)	
	3625 Hendricks Ave.		
	(/	Address)	
	Jacksonville, FL 32207		
	(City/Stat	e and Zip Code)	
For further infe	ormation concerning this matter, please call:		
Pat	e Foshee	904 306-2145	
	(Name of Person)	at ()  (Area Code & Daytime Telephone Number)	
Enclosed is a ch	eck for the following amount:		
	0 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 FILED FOR A LIMITED LIABILITY COMPANY 05 STATE

1.	The name of a limited liabil Corner Lot Investments		SALLA	PASSEE TEORIDE		
2.	The Articles of Organization	n were filed on June 18	, 2010	and assigned		
	document number L10000	065456	-			
3.	The delayed effective date t	date the dissolution if not effective on the date of filing:  Mective date cannot be prior to or more than 90 days later than date document is received for filing)				
4.	A description of occurrence 605.0707, Florida Statutes, (	that resulted in the limite copy 605.0707 on back co	d liability company's	s dissolution pursuant to section		
	Sale of All Assets					
5.	If there are no members, ent activities and affairs:	er the name and address of	of the person appoint	ed to wind up the company's		
Pate Foshee-3625 Hendricks Ave., 3		Jacksonville, FI 32207				
6. lis	Signature of an authorized parted above to wind up the con	person or if there are no many's activities and affa	embers, the signatur	e of the person appointed and		
<			ATE TOS	HEE		
	Signature	FILING FI	Prir EE: \$25.00	neu name		