

210000070681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

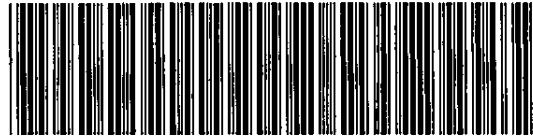
(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
14 JAN 17 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L. Burch JAN 21 2014

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Terra Vim 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:

Michael C. Runyan

(Name of Person)

Classical Acupuncture of Arlington, Inc.

(Firm/Company)

1309 St. Johns Bluff Rd. N. Suite B-101

(Address)

Jacksonville, FL 32225

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Runyan

(Name of Person)

at (**904**) **745-1735**

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 8, 2014

MICHAEL RUNYAN
1309 ST JOHNS BLUFF ROAD
JACKSONVILLE, FL 32225

SUBJECT: TERRA VIM LLC
Ref. Number: L10000070681

We have received your document for TERRA VIM LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch
Regulatory Specialist II

Letter Number: 814A00000496

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

FILED
14 JAN 17 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Terra Vim LLC
2. The Articles of Organization were filed on 07/02/2010 and assigned
document number L10000070681
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).
Because neither party has the time to run the company effectively.

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

Michael C. Runyan

Printed Name

Michael C. Runyan

FILING FEE: \$25.00