

L10000106733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

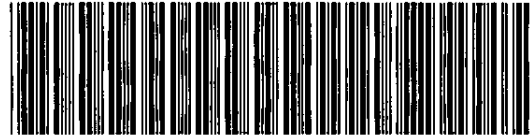
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/12/14--01043--022 **30.00

FILED
2014 MAY 12 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Cuffigan MAY 21 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OLD HARBOR FINANCIAL GROUP LLC

DOCUMENT NUMBER: L10000106733

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bruce DeVoogd

(Name of Contact Person)

(Firm/Company)

7803 Hickory Mill Court

(Address)

Houston, TX 77095

(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce DeVoogd

(Name of Contact Person)

at (**713**) **730-9001**

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

FILED
2014 MAY 12 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
OLD HARBOR FINANCIAL GROUP LLC
2. The Articles of Organization were filed on 10/13/2010 and assigned
document number L10000106733
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)
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).
Company closed Florida office

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

7803 Hickory Mill Court

Houston, TX 77095

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

Bruce DeVoogd
Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "*Notice of Limited Liability Company Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: OLD HARBOR FINANCIAL GROUP LLC

Document number of Limited Liability Company is: L10000106733

Date of dissolution was: 5/12/14

Description of information that must be included in a written claim:

FILED
2014 MAY 12 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Bruce DeVoogd
7803 Hickory Mill Court
Houston, TX 77095

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Bruce DeVoogd

Printed Name of the Person Filing

Bruce D. Voogd
Signature of the Person Filing