

L100000111755

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

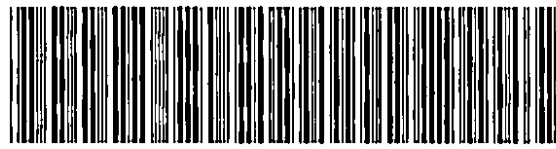
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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DIVISION OF REVENUE  
TALLAHASSEE, FLORIDA

Stnt Team

OCT 29 2021  
ALBRITTON

# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 10/28/2021

Acc#I20160000072

*en: c SW*

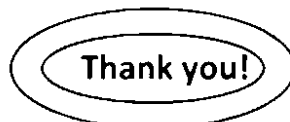
Name:	WBCMT 2006-C24 Timuquana Road, LLC
Document #:	
Order #:	13907708

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
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Document _____
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Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 25.00



## STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

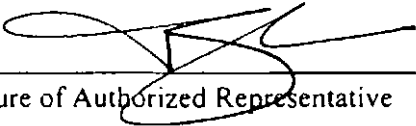
**FIRST:** The name of the limited liability company is: WBCMT 2006-C24 TIMUQUANA ROAD, LLC

**SECOND:** The Florida Document number of the limited liability company is: L10000111755

**THIRD:** The date of filing of the initial articles of organization is: 11/26/2010

**FOURTH:** The date of filing of the dissolution is: 10/29/2018

**FIFTH:** This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.



Signature of Authorized Representative

Tausha Wagner

Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

2021 OCT 28 AM 9:10