

#L10000123976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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600270916976

EFFECTIVE DATE
3-26-2015

03/26/15--01022--014 **25.00

FILED

2015 MAR 26 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
APR 16 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REPLACEMENT LENDER, 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:

KENNETH BOLLENBACK

(Name of Person)

REPLACEMENT LENDER

(Firm/Company)

160 SCARLET BLVD

(Address)

OLDSMAR, FL 34677

(City/State and Zip Code)

For further information concerning this matter, please call:

KENNETH BOLLENBACK

(Name of Person)

813

855-2656

at

(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

FILED
2015 MAR 26 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
REPLACEMENT LENDER, LLC
2. The Articles of Organization were filed on 12/02/2010 and assigned
document number L10000123976
3. The delayed effective date the dissolution if not effective on the date of filing: 3/26/2015
(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).
CLOSE OF BUSINESS
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

KENNETH BOLLENBACK
Printed Name

FILING FEE: \$25.00