

L 11 000050032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

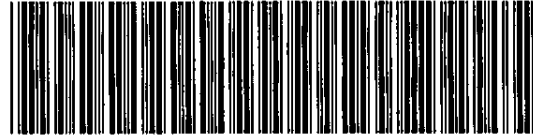
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL 6040000 JAN 21 2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Countryside Property Management, 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:

Jeffrey B. Bock

(Name of Person)

Jeffrey B. Bock, P.A.

(Firm/Company)

5010 W. Carmen Street, Suite 2020

(Address)

Tampa, FL 33609

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeffrey B. Bock

(Name of Person)

at 561 392-8788

(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**

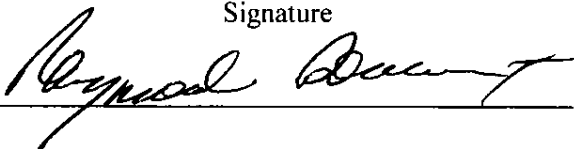
1. The name of a limited liability company is
Countryside Property Management, LLC
2. The Articles of Organization were filed on April 27, 2011 and assigned
document number L11000050032
3. The delayed effective date the dissolution if not effective on the date of filing: _____
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
The consent of all members to dissolve the LLC.

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

Printed Name



Raymond Doucet, President / Doucet, Martin and Associates Inc.

FILING FEE: \$25.00

FILED
TALLAHASSEE, FLORIDA
14 JUN 15 AM 10:40
2011