

L12000001639

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

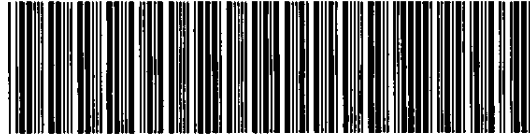
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/22/14--01007--023 **25.00

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2014 DEC 22 PM 3:06

FILED

N. Ouligan

DEC 30 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ST. JOSEPH'S FAMILY, 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:

Dexter Ball

(Name of Person)

(Firm/Company)

4520 East Maderos del Cuenta Dr.

(Address)

Paradise Valley, AZ 85253

(City/State and Zip Code)

For further information concerning this matter, please call:

Dexter Ball

(Name of Person)

at (602) 626-7053

(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

2014 DEC 22 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

ST. JOSEPH'S FAMILY LLC

2. The Articles of Organization were filed on 12/30/2011 and assigned

document number L12000001639

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).

Limited Liability Company has dissolved with the consent
of all the members.

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

Ball, George Dexter

4520 East Maderos del Cuenta Dr.

Paradise Valley, AZ 85253

Title : MGRM

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:

George Dexter Ball
Signature

George Dexter Ball
Printed Name

FILING FEE: \$25.00