

L2000065569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

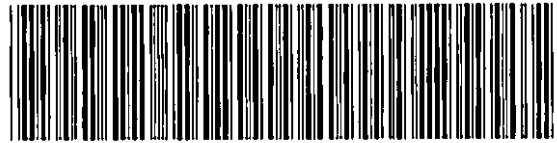
(Business Entity Name)

(Document Number)

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2021 OCT 28 AM 8:35
CLERK OF STATE
TALLAHASSEE, FL
ALL AMES LLC

Y. SULKER
OCT 29 2021

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 10/28/2021

Acc#120160000072

en: c DW

Name:	COMM 2006-C8 Villas 2102, LLC
Document #:	
Order #:	13907708

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Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
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W.P. Verifier _____
Ref# _____

Amount: \$ 25.00

Thank you!

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: _____

COMM 2006-C8 VILLAS 2102, LLC

SECOND:

The date of filing of the initial articles of organization is: 05/15/2012

THIRD: The date of filing of the dissolution is:

03/17/2020

FOURTH: 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

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20100128 AM 8:35
CLARK COUNTY, FL
CLARK COUNTY, FL

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

CR2E141 (12/13)