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To: Division of Corporations Fax Number : (850)617-6383 2015 SEP From: Account Name : EXPRESS CORPORATE FILING SERVICE Account Number : 120000000146 ω Phone : (305)444-4994 A11[8: Fax Number : (305)444-4977 LLC DISSOLUTION OR WITHDRAWAL 5 AM 10: CHEVRON TAFT MANAGEMENT LLC RECEIVE Certificate of Status Û SEP 18 Û Certified Copy Page Count 02 \$25.00 ഹ Estimated Charge

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9/18/2015 8:45:38 AM PAGE

September 18, 2015

FLORIDA DEPARTMENT OF STATE Division of Corporations

CHEVRON TAFT MANAGEMENT LLC 1601 N UNIVERSITY DR PEMBROKE PINES, FL 33024

SUBJECT: CREVRON TAFT MANAGEMENT LLC REF: L12000089221

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H15000222905 Letter Number: 915A00019698



P.O BOX 6327 - Tallahassee, Florida 32314

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FAX No.

September 17, 2015

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FLORIDA DEPARTMENT OF STATE Division of Corporations

CHEVRON TAFT MANAGEMENT LLC 1601 N UNIVERSITY DR PEMBROKE PINES, FL 33024

SUBJECT: CHEVRON TAFT MANAGEMENT LLC REF: L12000089221

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Jenna D Harris Regulatory Specialist II FAX Aud. #: H15000222905 Letter Number: 115A00019603

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P.O BOX 6327 - Tallahassee, Florida 32314

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## SEP/18/2015/FRI 11:16 AM

FAX No.

## P. 003

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is CHEVRON TAFT MANAGEMENT LLC

2. The Articles of Organization were filed on \_\_\_\_\_\_\_ and assigned \_\_\_\_\_\_\_ and assigned

document number L12000089221

3. The delayed effective date the dissolution if not effective on the date of filing; 09/15/2015 (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

NO LONGER IN 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

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Printed Name	CRE IANY OF STATE LAHASSEE FLONDA	SEP 18 AM 8: 56	