

L12 000157071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

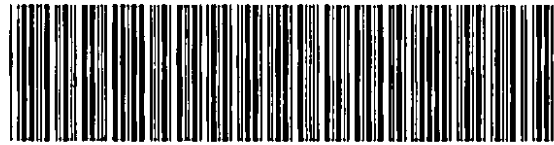
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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21 JAN 25 PM 2:03

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Dissolution

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hausman, 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:

Julia B. Rowe
(Name of Person)

(Firm/Company)

88 S. Bishop Road
(Address)

Santa Rosa Beach, FL 32459
(City/State and Zip Code)

For further information concerning this matter, please call:

Julia B. Rowe at (205) 531-4329
(Name of Person) (Area Code & Daytime Telephone Number)

21 JAN 25 PM 2:03

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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

21 JAN 25 PM 2:03

1. The name of a limited liability company is
HAUSMAN, LLC

2. The Articles of Organization were filed on 12/17/2012 and assigned
document number L12000157071

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)

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).

The sale of the sole asset of the LLC,
a lot and residence at 4709 Ocean Blvd.,
Destiny-by-the-Sea, Florida.

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

JULIA B. ROWE
88 S. Bishop Road
SANTA ROSA BEACH, FL
32459

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

Julia B. Rowe
Printed Name

FILING FEE: \$25.00