

L130000004879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

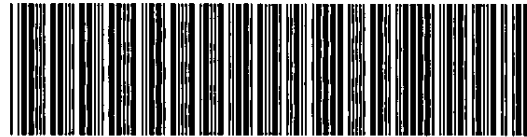
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000259251730

04/21/14--01038--012 **25.00

2014 APR 21 10:50

B. BOSTICK

APR 23 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STONE MEADOW COACHING, 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:

W.H. Lambe, Jr., Attorney

(Name of Person)

WALKER LAMBE RHUDY COSTLEY & GILL, PLLC

(Firm/Company)

PO BOX 51549

(Address)

DURHAM, NC 27717-1549

(City/State and Zip Code)

For further information concerning this matter, please call:

Kate Dailey

(Name of Person)

at (

919

493-1899

(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 STONE MEADOW COACHING, LLC
2. The Articles of Organization were filed on 01/09/2013 and assigned document number L13000004879
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).
- _____
- The owner has moved from the State of 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: Marlene Jones, Member
- 550 Fearrington Post
- Pittsboro, NC 27312
- _____
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:

The owner has moved from the State of Florida.

Marlene Jones, Member

550 Fearnington Post

Pittsboro, NC 27312

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

Marlene Jones, Member

Printed Name _____

FILING FEE: \$25.00

— 54 —