

L13000024257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

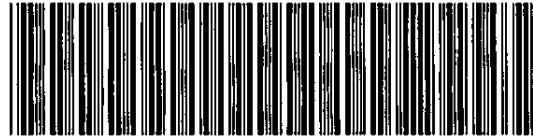
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2014 APR 28 PM 1:55
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: St. Joseph Associates Five Limited Liability Company
(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:

Linda F. Wright

(Name of Person)

St. Joseph Associates Five Limited Liability Company

(Firm/Company)

4979 Garden Dr

(Address)

Delray Beach Fl. 33445

(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 APR 28 PM 1:55

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For further information concerning this matter, please call:

Linda F. Wright

(Name of Person)

at (602) 369-4808
(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 St. Joseph Associates Five Limited Liability Company
2. The Articles of Organization were filed on February 15, 2013 and assigned document number L13000024257
3. The delayed effective date the dissolution if not effective on the date of filing: April 30th 2014
(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 business property for which the Company was formed was sold.
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Linda F. Wright Manager
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:

Linda V. Wright
Signature

Linda F. Wright
Printed Name

FILING FEE: \$25.00