

L13000042574

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch APR 16 2014

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** White Deer Ranch, Inc  
(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:

Roxanne Dunn  
(Name of Person)

White Deer Ranch  
(Firm/Company)

P.O. Box 197  
(Address)

Fishtail, MT 59028  
(City/State and Zip Code)

For further information concerning this matter, please call:

Roxanne Dunn at 406 290-4131  
(Name of Person) (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

White Deer Ranch, Inc.

2. The Articles of Organization were filed on 3/21/2013 and assigned

document number L13000042574

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).

This was a houseboat used for the  
purpose of vacation rentals. The boat  
was sold and the new owner will not  
use for same business purpose.

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

P.O. Box 197

Fishtail, MT 59028

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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:

Roxanne Dunn  
Signature

Roxanne Dunn  
Printed Name

**FILING FEE: \$25.00**