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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	. <u> </u>	

Office Use Only



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2015 AUG 24 PN 4: 42

ME 26 2015 J. HARRIS

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Crimson Perry Road, 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:

Tammie Etchells

(Name of Person)

Sabal Financial Group, LP

(Firm/Company)

4675 MacArthur Court Ste. 1550

(Address)

Newport Beach, CA 92660

(City/State and Zip Code)

For further information concerning this matter, please call:

Tammie Etchells

...949

381-2753

(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 Crimson Perry Road,	• •	
2.	The Articles of Organization were filed on 05/09/2013 and assigned document number L13000069647		
3.	. The delayed effective date the dissolution if not effective on the date of 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). Real Estate Sold, No Further Activity.		
5.	If there are no members, enter	er the name and address of the person appointed to wind up the company's	
	activities and affairs: R. Patterson Jackson		
		4675 MacArthur Court Suite 1550	
		Newport Beach, CA 92660	
6. ab	Signature of an authorized poove to wind up the company's	erson or if there are no members, the signature of the person appointed and listed sactivities and affairs:	
	Signature	Printed Name	
(Hatel	R. Patterson Jackson	

FILING FEE: \$25.00

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SECRETARY OF STATE
SECRETARY OF STATE