

L13080076815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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04/30/14--01024--016 **25.00

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2014 APR 30 PM 1:53
CLERK OF STATE
TALLAHASSEE FLORIDA

MAY 06 2014

J. BRUCE

FILE DATE 04/30/14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4210 Maceachen Blvd, 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:

Randall Oser
(Name of Person)

(Firm/Company)

5602 Marquesas Cir., Ste 207
(Address)

Sarasota, FL 34233
(City/State and Zip Code)

For further information concerning this matter, please call:

Torii K. Goar at (941) 914-7059
(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)

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CLERK OF STATE

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

4210 Maceachen Blvd, LLC

2. The Articles of Organization were filed on 5/24/2013 and assigned

document number L13000076815

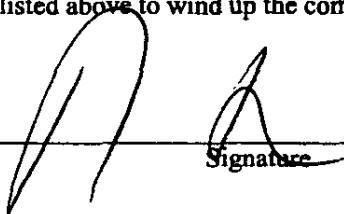
3. The delayed effective date the dissolution if not effective on the date of filing: 4/30/14
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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).

Property held by this LLC transferred
to another entity

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

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

Roger Tichenor
Printed Name

FILING FEE: \$25.00

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TALLAHASSEE
FLORIDA

EFFECTIVE DATE 04/30/14