# 113000142478

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
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2016 FEB 24 PM 6: 03

K. SALY EXAMINER FEB 25

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

# FLORIDA ASSET MANAGEMENT FIRM, 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:

## **KURT WESTFIELD**

(Name of Person)

#### FLORIDA ASSET MANAGEMENT FIRM, LLC

(Firm/Company)

## 12906 TAMPA OAKS BLVD SUITE 10

(Address)

**TAMPA, FL 33637** 

(City/State and Zip Code)

For further information concerning this matter, please call:

#### **KURT WESTFIELD**

..,813

865 3091

(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

•		
	ARTICLES OF DISSOLUTION	Fil
, .	FOR A LIMITED LIABILITY COMPANY	20.
		2016 FEB 21
The name of a limited liab	ility company is	rast CNI
FLORIDA ASSET MANAG	BEMENT FIRM, LLC	ALLAHA GET OF
	10/08/2013	2016 FEB 24  TAIL AHASSEE OF
The Articles of Organization	on were filed on 10/08/2013	and assigned
document number L13000	142478	
The delayed effective date	the dissolution if not effective on the date of filing date cannot be prior to or more than 90 days later than date	ng: 12/31/2015
Note: If the date inserted in	re date cannot be prior to or more than 90 days later than date this block does not meet the applicable statutory filing active date on the Department of State's records.	e document is received for filing) requirements, this date will not be
A description of occurrence	te that resulted in the limited liability company's of (copy 605.0707 on back cover letter).	lissolution pursuant to section
•	3 2015; FILING YEAR END DISSOLUTION DOCU	MENTS
	nter the name and address of the person appointed	to wind up the company's
activities and affairs:	3030 ROCKY POINT, SUITE 150, TAMPA, FL 3	3607
Signature of an authorized sted above to wind up the co	person or if there are no members, the signature of ompany's activities and affairs:	of the person appointed and
	KURT WESTFIELD M	GRM
Signature	Printe	d Name

**FILING FEE: \$25.00**