

L13000 148344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

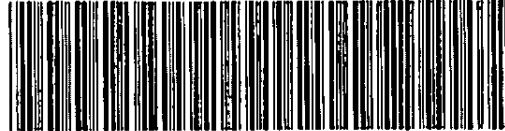
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/02/14--01004--002 \*\*25.00

FILED  
14 APR -2 AM 11:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers APR 14 2014  
J. Shivers APR 04 2014

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: White Sands Lawn + Home Care, 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:

Barry Meredith  
(Name of Person)

White Sands Lawn + Home Care, LLC  
(Firm/Company)

4364 Canton Court  
(Address)

Gulf Breeze, FL 32563  
(City/State and Zip Code)

For further information concerning this matter, please call:

Barry Meredith at (850) 916-1451  
(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 Sands Lawn & Home Care, LLC

2. The Articles of Organization were filed on 10-22-13 and assigned

document number L1300014834

3. The delayed effective date the dissolution if not effective on the date of filing: 3-29-14  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

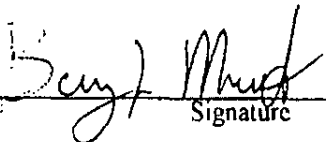
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

I was going to try and start my own business  
due to a suspension of my Coast Guard license but  
due to lack of work and no revenue I am reentering  
the <sup>local</sup> job market. I am currently on unemployment and seeking  
a job for work.

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

4364 Canton Court  
Gulf Breeze, FL 32561

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

Barry Meredith  
Printed Name

**FILING FEE: \$25.00**

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TALLAHASSEE, FLORIDA

FILED