

43000155481

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(Business Entity Name)

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JAN 09 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HOMES FOR A CURE, 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:

MARY B. CASTO  
(Name of Person)

HOMES FOR A CURE, LLC  
(Firm/Company)

19600 LOXAHATCHEE RIVER ROAD  
(Address)

JUPITER, FL 33458  
(City/State and Zip Code)

For further information concerning this matter, please call:

Mary B. Casto at (561) 626-3444  
(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

2019 11 30 AM 11:21

1. The name of a limited liability company is

HOMES FOR A CURE, LLC

2. The Articles of Organization were filed on 11/5/13 and assigned

document number L13000155481

3. The delayed effective date the dissolution if not effective on the date of filing: DECEMBER 31, 2019  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 AM NOW 85 YEARS OLD AND NO LONGER  
USING THIS LLC. THE LLC OWNS  
NOTHING AND IS NO LONGER DOING  
ANY TYPE OF BUSINESS.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: I AM ONLY MEMBER + ABLE TO CLOSE COMPANY.

MARY B. CASTO

19600 LOXAHATCHEE RIVER ROAD

JUPITER, FL 33458-2424

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:

Mary B. Casto  
Signature

MARY B. CASTO  
Printed Name

FILING FEE: \$25.00