

L14 0000 23983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

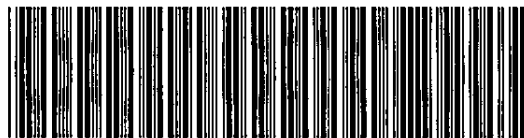
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
14 OCT 30 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Shivers OCT 31 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Acacia Community Association Management, 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:

Pat Naldrett-Bilodeau
(Name of Person)

(Firm/Company)

3201 63rd St West
(Address)

Bradenton, FL 34209
(City/State and Zip Code)

For further information concerning this matter, please call:

Pat Naldrett-Bilodeau at (941) 685-0500
(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:

Acacia Community Association Management, LLC

2. The Articles of Organization were filed on September 10, 2014 and assigned

document number L14000023983

3. The delayed effective date the dissolution is not effective on the date of filing: _____

(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).

Voluntarily end existence due to my resignation
as the Sole Member. Signed: Pat Naldrett Bilodeau

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

Pat Naldrett-Bilodeau
3201 63rd St West
Bradenton, FL 34209

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

Pat Naldrett-Bilodeau
Printed Name

FILING FEE: \$25.00

FILED
14 OCT 30 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA