#L 140000046127

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nai	me)
(Do	ocument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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2014 JUL 14 PM 1:56

K. SALY EXAMINER

JUL 1 5 2014

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Crimson Fort Pickens Holdings, 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:

Tammie Etchells

(Name of Person)

Sabal Financial Group, LP

(Firm/Company)

4675 MacArthur Court Ste. 1550

(Address)

Newport Beach, CA 92660

(City/State and Zip Code)

For further information concerning this matter, please call:

Tammie Etchells

,,949 ,

381-2753

(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

FILED

2014 JUL 14 PM 1:56

SLURETARY OF STATE
ALLAHASSEE, FLORID.

1.	The name of a limited liabile Crimson Fort Picken	• • •	TALLAHASSEE, FLO	
2.	The Articles of Organization were filed on 03/19/2014 and assigned document number L14000046127			
3.	The delayed effective date the dissolution if not effective on the date of filing:			
4.	A description of occurrence 605.0707, Florida Statutes, (Real Estate Sold, No	copy 605.0707 on back cover letter).	empany's dissolution pursuant to section	
5.	If there are no members, ent	er the name and address of the person	appointed to wind up the company's	
	activities and affairs:	R. Patterson Jackson		
		4675 MacArthur Court Suite 1550		
		Newport Beach, CA 92660		
6. ab	Signature of an authorized pove to wind up the company'	erson or if there are no members, the s activities and affairs:	signature of the person appointed and listed	
	Signature		Printed Name	
2	HILL	R. Patter	son Jackson	

FILING FEE: \$25.00