C14000045680

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COVER LETTER

Divi	sion of Corporations				
SUBJECT:	STONEBRIDGE RECOVERY HO	MES LLC.			
SUBJECT	(Name of Limite	d Liability Compa	ny)	<u> </u>	
The enclosed	Articles of Dissolution and fee(s) are submitted	ed for filing.			
Please return	all correspondence concerning this matter to t	he following:			
	KENDALL T. KERRIGAN SR				
(Name of Person)					
	N/A				
(Firm/Company)					
		331 NEC			
		3.			
	POMPANO BEACH, FLORIDA	33060		1,5,217 1,-≪ 11e£,	~ ↓
	(City/State	e and Zip Code)			聖
For further in	formation concerning this matter, please call:				(2) (3)
KE	NDALL T KERRIGAN SR.	954 at (621-7522		
	(Name of Person)	(Area Co	ode & Daytime Telephone	Number)	
Enclosed is a c	heck for the following amount:				
✓ \$25.00 Filing Fee and Certificate of Dissolution			g Fee, Certificate of Disso opy (additional copy is en		
	MAILING ADDRESS:	STR	EET/COURIER A	DDRESS	•

TO:

Registration Section

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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 STONEBRIDGE RECOVERY HOMES LLC.					
2.	The Articles of Organization	on were filed on 6-16-2014 and assigned				
	document number L14000095680					
3.	The delayed effective date the deflective	ate the dissolution if not effective on the date of filing: 12-31-2014 ctive 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).					
	THE CORPORATION H	IAS NOT COMMEN	ICED TO CONDUCT ITS AFFAIRS.			
	THE DISSOLUTION WAS AUTHORIZED BY ALL DIRECTORS					
	ALL DEPTS, OBLIGATIONS AND LIABILITIES OF THE LLC CORPORATION HAVE					
	BEEN PAID OR DISCHARGED. THERE ARE NO SUITS PENDING IN ANY COURT					
5.	If there are no members, enter	er the name and addres	s of the person appointed to wind up the company's			
	activities and affairs:	KENDALL T. KER	[m] [N]			
		733 NE 3 STREET				
	POMPANO BEACH FLORIDA 33060					
6. lis	Signature of an authorized p ted above to wind up the com	erson or if there are no apany's activities and a	members, the signature of the person appointed and ffairs:			
		. 0				
//	enest T. /L	= 11.	KENDALL T. KERRIGAN SR			
4/2	Signature		Printed Name			

FILING FEE: \$25.00