114000189419

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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05/08/19--01009--012 **25.00

MAY 17 2019 5-S. YOUNG Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Florida Department of State Division of Corporations

RE: Voluntary Dissolution of THINK Realty LLC, a Limited Liability Company

Please accept the attached, along with this personal cover letter, along with my check in the amount of \$25, payable to the Florida Department of State for the voluntary dissolution of THINK Realty LLC. Document ID: L14000189419. Articles of Organization filed on 12/11/14. **The delayed effective date is 6/15/19.**

I am taking this action because I plan to relocate to another state and request to dissolve THINK Realty LLC and amend my license status to Voluntary Inactive, effective 6/15/19.

As the Broker/Owner of THINK Realty LLC, I have no employees. I have enjoyed a seventeen-year career as a Realtor in the State of Florida.

Kindly let me know if any additional information is needed and, if not, file the articles of dissolution and issue a certificate of dissolution.

Thank you.

Constance C. Langhorst Broker/Owner, THINK Realty LLC

Return Address: 201 4th St. S. #610, St. Petersburg, FL 33701

Telephone: (727) 480-5954

NOTE: Mailing Address (After 6/21/19): 1718 Harmon Drive, Wyoming, OH 45215

Attachment(s)

COVER LETTER

Division of Corporations						
SUBJECT: THINK Realty 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:						
Constance C. Langhorst (Name of Person)						
THINK Realty LLC (Firm/Company)						
201 4th St. S. #610 (Address)						
St. Petersburg FL 33701 (City/State and Zip Code)						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Constance C. Loughorst at 727, 480-5954 (Name of Person) (Area Code & Daytime Telephone Number)						
(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: STREET/COUDIED ADDRESS.						

TO:

Registration Section

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 l	iability company is	_		
TH	ink Realty	LLC		
2. The Articles of Organiz	ration were filed on	11/14	and assigned	
document number L1	14000189419	_ 	,	
effe <u>Note:</u> If the date inserte	late the dissolution if not ef- ective date cannot be prior to or m d in this block does not meet the effective date on the Departme	iore than 90 days later than d he applicable statutory fili	late document is received f	
4. A description of occurr 605.0707, Florida Statu	rence that resulted in the limites, (copy 605.0707 on back	nited liability company's cover letter).	s dissolution pursuan	t to section
Trouting bu	1 of sime	· Cusing	1100	<u> </u>
My Live	use status	s will be	revised	to
Vo luntar	y Inactive.			
	<i></i>		<u> </u>	19
5. If there are no members activities and affairs:	s, enter the name and address	es of the person appoint	ed to wind up the con	npany's
		\sim	,	(*)
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		. .		
6. Signature of an authorize listed above to wind up the	zed person or if there are no e company's activities and a	o members, the signatur affairs:	e of the person appoin	nted and
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FILING FEE: \$25.00