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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 30 2015
S. YOUNG

Department of State
Division of Corporations
P.O.Box 6327
Tallahassee FL 32314

Please DO NOT SEPARATE

1. Dissolution of Florida Civil Collaborative Practice Group, LLC with filing fee of \$25.00
2. Articles of Incorporation for not-for profit, Florida Civil Collaborative Practice Group, Inc. with filing fee of \$78.75.

Thank you,
Guilene F. Theodore

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Civil Collaborative Practice Group 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:

Guilene F. Theodore

(Name of Person)

Collaborative Conflict Resolution, PLLC

(Firm/Company)

13014 N. Dale Mabry Hwy #526

(Address)

Tampa, Florida 33618-2808

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Guilene F. Theodore

(Name of Person)

at (813) 843-4336

(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
FLORIDA CIVIL COLLABORATIVE PRACTICE GROUP LLC
2. The Articles of Organization were filed on APRIL 27, 2015 and assigned
document number L15000073230
3. The delayed effective date the dissolution if not effective on the date of filing: DATE OF FILING
(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).
Pursuant to section 605.0707(2), Florida Statutes, all members have consented to the dissolution of the limited
liability company. The members desire to form a new Florida not-for-profit corporation with the name
"Florida Civil Collaborative Practice Group, Inc." The limited liability company has no intention of revoking its
dissolution, thereby releasing the name for use to another entity.
5. If there are no members, enter the name and address of the person appointed to wind up the company
activities and affairs: _____

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:

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TALLAHASSEE, FLORIDA


Signature

Guilene F. Theodore
Printed Name

FILING FEE: \$25.00