

L15 000 134013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

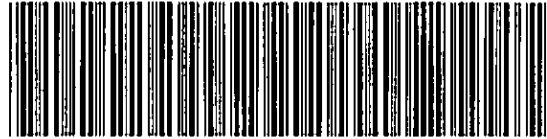
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/29/20 --01011--011 *25.00

20 JAN -9 PM 1:55
U.S. DEPT. OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

FEB 05 2020
C. MCNAR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cambridge Consulting, LLC

(Name of Limited Liability Company)

RECEIVED
20 JAN -9 PM 1:56
TALLAHASSEE, FLORIDA

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul R. Hederman

(Name of Person)

(Firm/Company)

7906 SE Mammoth Drive

(Address)

Hobe Sound, FL 33455

(City/State and Zip Code)

For further information concerning this matter, please call:

Paul R. Hederman

772

678-2548

at (_____) _____

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

20 JAN -9 PM 1:36
FILED
CLERK OF THE COURT
HALL OF RECORDS
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Cambridge Consulting, LLC

2. The Articles of Organization were filed on August 10, 2015 and assigned
document number L15000136013

3. The delayed effective date the dissolution if 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)
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).

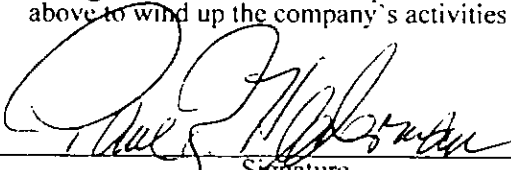
Retirement of Owner

Retirement of Owner

Retirement of Owner

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



Signature

PAUL R. HEDERMAN

Printed Name

FILING FEE: \$25.00