L160000 84802

(Requestor's Name)			
(Address)			
(Address)			
(City	//State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bus	siness Entity Nam	e)	
(Document Number)			
Certified Copies	Certificates	of Status	
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SECRETARY OF STATE

K.SALY EXAMINER JUN 28

COVER LETTER

TO:

Registration Section
Division of Corporations

Subject: Crimson Dodd Road 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

_{a.} 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

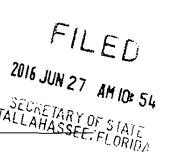
\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

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



1.	The name of a limited liabili Crimson Dodd Road	• • •	TALLAHASSEE: FLORIO	
2.	The Articles of Organization document number <u>L16000</u>	o were filed on 05/14/2016 0084802	and assigned	
3.	The delayed effective date th	e the dissolution if not effective on the date of 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). Real Estate Sold, No Further Activity.			
5. If there are no members, enter 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		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 sign sactivities and affairs:	gnature of the person appointed and listed	
Signature			Printed Name	
(Kal 2	R. Patters	on Jackson	

FILING FEE: \$25.00