

L17000179851

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CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

O SIMMONS

MAY 04 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Corkwood Partners, 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:

Temple H. Drummond

(Name of Person)

Drummond Wehle Yonge LLP

(Firm/Company)

6987 East Fowler Avenue

(Address)

Tampa, Florida 33617

(City/State and Zip Code)

For further information concerning this matter, please call:

Temple H. Drummond

(Name of Person)

at 813 983-8000

(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 32304

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
6111 Fowler Avenue, Suite 200  
Tampa, FL 33617

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

1. The name of a limited liability company is

Corkwood Partners, LLC

2. The Articles of Organization were filed on August 22, 2017 and assigned

document number L17000179851

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).

A unanimous vote of the members to dissolve the Company

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:

Temple H. Drummond Authorized agent  
Signature

Temple H. Drummond  
Printed Name

**FILING FEE: \$25.00**

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