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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Hunter Oaks Umatilla, FL., HDA, 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:		
David Parker (Name of Person)	73	- ma
(Firm/Company)  17535 Harvest Ridge Ct. (Address)  Umatilla FL. 32784 (City/State and Zip Code)		う
(Chyrodic and rap code)		
For further information concerning this matter, please call:		
Sharon Anget at 391 271-7917 (Name of Person) (Area Code & Daytime Telephone Number)	her)	
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	
Hunter Oaks Umatilla, FL., HOA, LL	. С
2. The Articles of Organization were filed on	and assigned
document number <u>L 17000 25 333 9</u>	
3. The delayed effective date the dissolution if not effective on the date of filin (effective date cannot be prior to or more than 90 days later than date Note: If the date inserted in this block does not meet the applicable statutory filing listed as the document's effective date on the Department of State's records.	g: date of filing document is received for filing) of requirements, this date will not be
4. A description of occurrence that resulted in the limited liability company's d 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	lissolution pursuant to section
Advice from our Attorney to dissolve	this LLC
because our HOA already has an exis	sting
Corporation in effect.	~
5. If there are no members, enter the name and address of the person appointed	to wind up the company's
activities and affairs: Sharon Anger	r.1
41007 Halo Dr.	
Umatilla, FL 32784	-
	<u> </u>
6. Signature of an authorized person or if there are no members, the signature of listed above to wind up the company's activities and affairs:	of the person appointed and
Mrsson M. axya SHARON 1 Signature SHARON 1	M. ANGER d Name

FILING FEE: \$25.00