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(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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JUL 3 () 2020 I ALBRITTON Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850,656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

Melissa Stops mstops@ingserv.com 850.656,7953

REQUEST DATE: 7/29/2020

PRIORITY Routine

OUR REF # (Order ID#) 842601

ORDER ENTITY TOWERCOM VIII B LLC

PLEASE PERFORM THE FOLLOWING SERVICES: TOWERCOM VIII B LLC (FL)

File the attached dissolution document

RETURN/FORWARDING INSTRUCTIONS ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956.

Sincerely,

Please bill us for your services and he sure to include our reference number on the invoice and courier package if applicable. For USG gidlers, please include the thru data on the results.

Wednesday, July 29, 1020

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

		FOR A LIMITED LIABILITY C	COMPANY) 3
١.	The name of a limited lial TOWERCOM VIII B LLC				ML 29 MI 8:45
	The Articles of Organizat	ion were filed on12/30/2019	and assign	ıed	E 8
	document number L2000)007142			. 5
	Note: If the date inserted i listed as the document's eff	e the dissolution if not effective on the date cannot be prior to or more than 90 on this block does not meet the applicable fective date on the Department of State	the date of filing: days later than date document is re- le statutory filing requirements, s records.	ceived for filing) this date will r) not be
٠,	A description of occurren 605.0707, Florida Statutes	ce that resulted in the limited liability, (copy 605.0707 on back cover letter	ty company's dissolution pu er).	rsuant to secti	ion
	The c	ompany has not had any members	for the past 90 consecutive	days.	-
_					
-					•
-				 -	
	If there are no members, e	nter the name and address of the pe	rson appointed to wind up th	e company's	
	activities and affairs:	David Olson, Executive Vice Presi	dent		
		241 Atlantic Blvd, Suite 201			
		Neptune Beach, FL 32266			
bc	Signature of an authorized ve to wind up the compan	person or if there are no members, y's activities and affairs:	the signature of the person a	ppointed and	listed
	anno	David C	Olson, Executive Vice President		
	Signature		Printed Name		

FILING FEE: \$25.00