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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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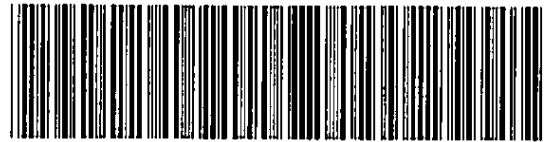
(Business Entity Name)

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TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ZP 356 TALLAHASSEE TOWNHOMES, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DONNA DICKENS

Name of Person

ZIMMER AND ZIMMER, L.L.P.

Firm/Company

PO BOX 2628

Address

WILMINGTON, NC 28402

City/State and Zip Code

DonnaDickens@zdc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DONNA DICKENS

Name of Person

at (910) 765-0429

Area Code Daytime Telephone Number

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

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: _____

ZP 356 TALLAHASSEE TOWNHOMES, LLC


SECOND:

The date of filing of the initial articles of organization is: 10/21/2020.

THIRD: The date of filing of the dissolution is:

March 22, 2021.

FOURTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.



Signature of Authorized Representative

Jeffrey L. Zimmer, Duly Authorized Agent

Typed or printed name of signature

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2021 JUN 17 AM 10:16
SECRETARY OF STATE
TALLAHASSEE

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)