

h21 000 119 467

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

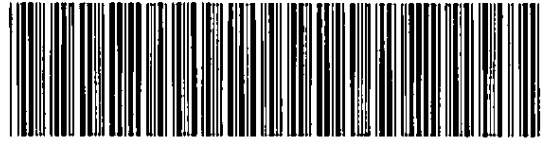
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700389427057

06/17/22--01014--005 **25.00

FILED
2022 JUN 17 PM 2:09
CLERK OF COURT
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tails In The Palms, 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:

William J. Maguire

(Name of Person)

Maguire Law Chartered

(Firm/Company)

400 Columbia Drive, Suite 100

(Address)

West Palm Beach, FL 33409

(City/State and Zip Code)

For further information concerning this matter, please call:

William J. Maguire

(Name of Person)

561

687-8100

at (

_____) _____
(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of a limited liability company is

Tails In The Palms, LLC

2. The Articles of Organization were filed on March 12, 2021 and assigned

document number L21000119467

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).

An event or circumstance that the operating agreement states causes dissolution; specifically, a sufficient

Membership vote for dissolution.

5. If there are no members, enter the name and address of the person appointed to wind up the company.

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:

DocuSigned by:

Barbara Gallacher

1C994F85869C4DD

Signature

Barbara Gallacher

Printed Name

06/10/2022

FILING FEE: \$25.00

2022 JUN 17 PM 2:09
TALLAHASSEE, FLORIDA

FILED

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Tails In The Palms, LLC

Document number of Limited Liability Company is: 1.21000119467

Date of dissolution was: 06/10/2022

Description of information that must be included in a written claim:

Name and contact information for claimant; amount claimed; basis and nature of claim, including whether claim is secured,

contingent, disputed or unliquidated; copies of documents supporting claim, if any. Examples of basis of claim include

goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

William J. Maguire, Maguire Law Chartered, 400 Colombia Drive, Suite 100,

West Palm Beach, FL 33409

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Barbara Gallacher

Printed Name of the Person Filing

DocuSigned by:

Barbara Gallacher

Signature of the Person Filing

06/10/2022

FILED
2022 JUN 17 PM 2:09
SEALY STATE
TALLAHASSEE, FL 32304