

L21 000 292 085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

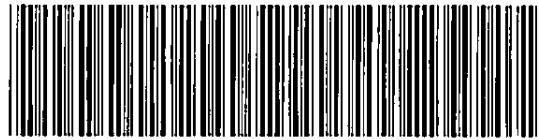
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SECRETARY OF STATE  
TALLAHASSEE, FL  
2024 APR 15 PM 2:16

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ACUFF & ACUFF ASSOCIATES, 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 P. ACUFF

\_\_\_\_\_  
(Name of Person)

ACUFF & ACUFF ASSOCIATES, LLC

\_\_\_\_\_  
(Firm/Company)

1320 TIMBERIDGE LOOP NORTH

\_\_\_\_\_  
(Address)

LAKELAND, FL. 33809

\_\_\_\_\_  
(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FL

For further information concerning this matter, please call:

WILLIAM P. ACUFF at (863) 899-8543  
\_\_\_\_\_  
(Name of Person) (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

ACUFF & ACUFF ASSOCIATES, LLC

2. The Articles of Organization were filed on 06/23/2021 and assigned

document number L21000292085

3. The delayed effective date the dissolution if not effective on the date of filing: 05/01/2024  
(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).

OWNERS CEASED PURSUING BUSINESS DEVELOPMENT ON 01/01/2023

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

WILLIAM P. ACUFF

NANCY C. ACUFF

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TALLAHASSEE, FL

FILED

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:

William P. Acuff  
Signature

William P. Acuff  
Printed Name

FILING FEE: \$25.00 — See ~~letter~~ letter

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