

W990000004057

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 MAY -9 PM 3:07

FILED

MAY 12 2014

T. BROWN

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pinellas L.L.C.

(Name of Limited Liability Company)

and Notice of Limited Liability Company Dissolution  
The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Heather R. Christman, Esq.

(Name of Person)

Christman Law, P.L.

(Firm/Company)

P.O. Box 7692

(Address)

Winter Haven, Florida 33883-7692

(City/State and Zip Code)

For further information concerning this matter, please call:

Heather R. Christman

(Name of Person)

863

294-3600

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/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 11, 2014

HEATHER R. CHRISTMAN, ESQ.  
CHRISTMAN LAW, PLL  
PO BOX 7692  
WINTER HAVEN, FL 33883-7692

SUBJECT: PINELLAS L.L.C.  
Ref. Number: L99000004057

We have received your document for PINELLAS L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown  
Regulatory Specialist II

Letter Number: 614A00007852

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

**FILED**  
14 MAY -9 PM 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
Pinellas L.L.C.

2. The Articles of Organization were filed on 06/29/1999 and assigned  
document number L99000004057

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)

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).

The written consent of all of the members of the limited liability company.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

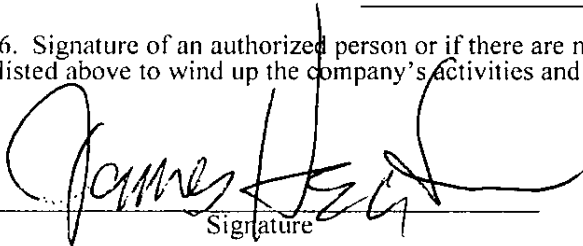
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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:

  
Signature

James L. Heaton

Printed Name

**FILING FEE: \$25.00**

## 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: Pinellas L.L.C.

Document number of Limited Liability Company is: L99000004057

Date of dissolution was: May 9, 2014

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

- 1) The name, address and telephone number of the claimant; 2) Amount of the Claim;
- 3) Statement as to the basis for the claim; 4) The date the claim accrued or will accrue;
- 5) Description & date of any complaint, judgment or other court order relating to claim;
- 6) Statement as to whether the claim is secured and, if so, a description of the collateral, if any.

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

James L. Heaton, MGRM

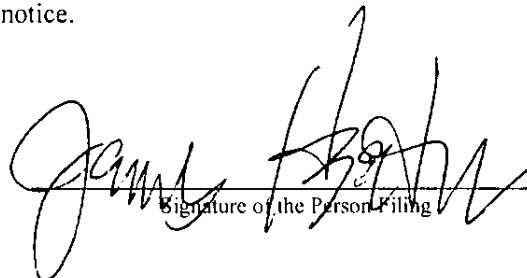
218 Ruby Lake Lane

Winter Haven, FL 33884

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.

James L. Heaton

Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**