

M11000003281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

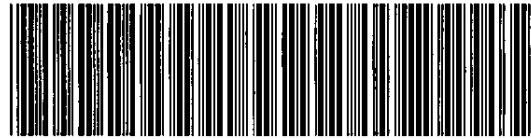
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SEP 30 2011

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

707

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ligon Grace, 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:

Ligon Grace

(Name of Person)

Ligon Grace, LLC

(Firm/Company)

517 Turnberry Rd.

(Address)

Cantonment, FL 32533

(City/State and Zip Code)

For further information concerning this matter, please call:

Ligon Grace

(Name of Person)

at (850) 723-2219

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



30.00 Filing Fee &
Certificate of Status



\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$60.00 Filing Fee;
Certificate of Status &
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

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN
FLORIDA**

Ligon GRACE, LLC

(Name of limited liability company)

Alabama

(Jurisdiction of its organization)

(Florida Document Number)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.

1111 Tusculum Rd

(Mailing address)

Canal Creek, FL 32533

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.

[Signature]

(Signature of member or authorized representative of a member)

Ligon GRACE

(Typed or printed name of signee)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA