

POODOS 155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP☐ WAIT☐ MAIL

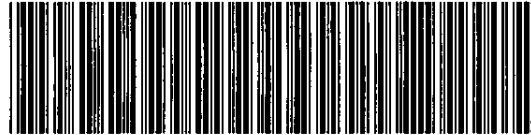
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/16/15--01022--022 **35.00


 文部科学省
 教育部
 文化庁
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 科学技術庁

76 JAN 14 PM 6:51

SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 15 2016

R. WHITE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 18, 2015

WILLIAM C LLOYD
147 2ND AVE S, STE 400
ST. PETERSBURG, FL 33701

SUBJECT: 540-A HIGHLANDS, INC.
Ref. Number: P00000085455

We have received your document for 540-A HIGHLANDS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions 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) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 615A00026527

RECEIVED

15 JAN 14 PM 2:22

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

540-A Highlands, Inc.

LETTER OF TRANSMITTAL

December 14, 2015

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

Sent Via FedEx (2-Day) #7752 0044 8465

Dear Madam or Sir:

We are sending the following items(s):

<u>Company</u>	<u>Description</u>
540-A Highlands, Inc.	<ul style="list-style-type: none">• Cover Letter• Articles of Dissolution for a Limited Liability Company• Check #2026 in the amount of \$35.00 payable to the Florida Department of State

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 540-A Highlands, Inc.

DOCUMENT NUMBER: P00000085455

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William C. Lloyd

(Name of Contact Person)

540-A Highlands, Inc.

(Firm/Company)

147 Second Ave South, Suite 400

(Address)

St. Petersburg, FL 33701

(City/State and Zip Code)

For further information concerning this matter, please call:

Marcia L. Simmons

at (727) 895-2150

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed) |
|---|--|---|---|

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

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

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

540-A Highlands, Inc.

SECOND: The document number of the corporation (if known): P00000085455

THIRD: The date dissolution was authorized: 12/11/2015

Effective date of dissolution if applicable:

(no more than 90 days after dissolution file date)

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.

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature:

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

William C. Lloyd

(Typed or printed name of person signing)

Vice President

(Title of person signing)

SECRETARY OF STATE
TALLAHASSEE FLORIDA

16 JAN 14 PM 6:50

FILED

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

540-A Highlands, Inc.

Name of Corporation: _____

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Name and address of claimant. Date claim was incurred.

Events and dates giving rights to the claim.

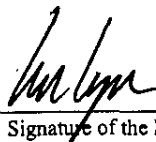
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

147 Second Avenue South, St. Petersburg, FL 33701

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

William C. Lloyd, Vice President

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00