

ND5000001932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

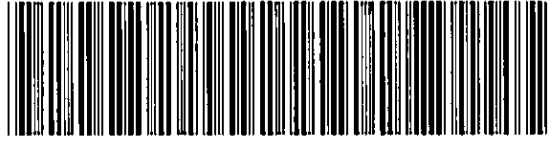
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



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2019 DEC 26 PM 10:19

2019 DEC 26 AM 10:56
TALLAHASSEE, FLORIDA

2019 DEC 27 AM 10:56

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DEC 27 2019

FLORIDA FILING & SEARCH SERVICES, INC.
P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 12/26/19

NAME: ABC DISPOSITION COMPANY, LLC

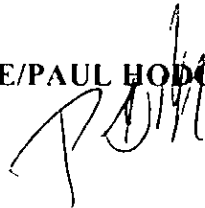
TYPE OF FILING: DISSOLUTION

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



26/19
25
12/26/19

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

1. The name of a limited liability company is
ABC Disposition Company, LLC

2. The Articles of Organization were filed on February 4, 2005 and assigned
document number L05000011932

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).
The resolutions authorizing the termination were duly adopted by the sole Member.

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

2019-02-26 11:10:19

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

Gregory S. Daily, Manager
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: ABC Disposition Company, LLC

Document number of Limited Liability Company is: L05000011932

Date of dissolution was: _____

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

The following information shall be provided to substantiate a claim:

1. Name and address of person asserting the claim;

2. Amount of the claim; and

3. The circumstances under which the claim arose.

No claims are hereby admitted. A claim is barred unless an action is commenced within four (4) years after the filing of this notice.

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

Chris Raybeck

Bone McAllester Norton

511 Union Street, Ste. 1600

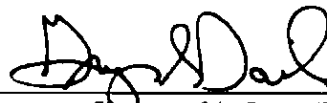
Nashville, TN 37219

2019 DEC 26 PM 10:19

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.

Gregory S. Daily, Manager

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