# L14 600 128008

| (Requestor's Name)      |                     |                   |  |  |
|-------------------------|---------------------|-------------------|--|--|
|                         |                     |                   |  |  |
| (Address)               |                     |                   |  |  |
|                         |                     |                   |  |  |
| (Ad                     | dress)              |                   |  |  |
| •                       | ·                   |                   |  |  |
| (Cit                    | y/State/Zip/Phone   | .#\               |  |  |
| (0).                    | y/Clate/Zip/i fione | · <del>**</del> / |  |  |
| PICK-UP                 | ☐ WAIT              | MAIL              |  |  |
|                         |                     |                   |  |  |
| (Bu                     | siness Entity Nam   | ne)               |  |  |
|                         |                     |                   |  |  |
| (Do                     | cument Number)      |                   |  |  |
| (==                     | ,,                  |                   |  |  |
| O- ME- d O- dia         | O-2'5-1             | -1-01-1-1         |  |  |
| Certified Copies        | _ Certificates      | or Status         |  |  |
|                         |                     |                   |  |  |
| Special Instructions to | Filing Officer:     |                   |  |  |
|                         |                     |                   |  |  |
|                         |                     |                   |  |  |
|                         |                     |                   |  |  |
|                         |                     |                   |  |  |
|                         |                     |                   |  |  |
|                         |                     |                   |  |  |
|                         |                     |                   |  |  |
|                         |                     | <u>_</u>          |  |  |

Office Use Only



300264146873

09/12/14--01020--011 \*\*25.00

FILED

14 SEP 12 AM II: 42

SECRETARY OF STATE

VALUATIONS SEE: FILERIES

elin

## **COVER LETTER**

| TO:                                     |   | istration Section<br>ision of Corporations      |  |  |  |  |  |
|---|---|---|--|--|--|--|--|
| SUBJE                                   | Impressions Realty Group, LLC                         |   |  |  |  |  |  |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |   | (Name of Limite                                 | ed Liability Company)                              |  |  |  |  |
|   |   |   |  |  |  |  |  |
| The end                                 | losed   | Articles of Dissolution and fee(s) are submitt  | ed for filing.                                     |  |  |  |  |
| Please r                                | return  | all correspondence concerning this matter to    | the following:                                     |  |  |  |  |
|   |   | Debbie Nevadomski                               |  |  |  |  |  |
|   | (Name of Person)                                      |   |  |  |  |  |  |
|   |   | · ·   | ic of reliably                                     |  |  |  |  |
|   | Impressions Realty Group                              |   |  |  |  |  |  |
|   |   | (Fin  | n/Company)   |  |  |  |  |
|   | Keller Williams Realty Group 8210 Lakewood Ranch Blvd |   |  |  |  |  |  |
|   | (Address)   |   |  |  |  |  |  |
|   |   | Lakewood Ranch FL 34202                         |  |  |  |  |  |
|   | (City/State and Zip Code)                             |   |  |  |  |  |  |
| For furt                                | ther ir   | nformation concerning this matter, please call: |  |  |  |  |  |
| Debbie Nevadomski                       |   | ebbie Nevadomski                                | at (941) 894-2515                                  |  |  |  |  |
|   |   | (Name of Person)                                | (Area Code & Daytime Telephone Number)             |  |  |  |  |
| Enclose                                 | d is a (  | check for the following amount:                 |  |  |  |  |  |
|   | \$25.   | 00 Filing Fee and Certificate of Dissolution    | ☐ \$55.00 Filing Fee, Certificate of Dissolution & |  |  |  |  |

## 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

Certified Copy (additional copy is enclosed)

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1.        | The name of a limited liability company is Impressions Realty Group LLC   |                                   |  |  |  |  |
|-----------|---|-----------------------------------|--|--|--|--|
| 2.        | The Articles of Organization were filed on $8.14-2014$ and assigned   |                                   |  |  |  |  |
|           | document number <u>L1400012 8005</u>  |                                   |  |  |  |  |
| 3.        | The delayed effective date the dissolution if not effective on the date of filing: 8-14-2014 (effective date cannot be prior to or more than 90 days later than date document is received for filing) |                                   |  |  |  |  |
| 4.        | 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).                     |                                   |  |  |  |  |
|           | Partnership was dissolved due to personal reasons of Janine Varney.   |                                   |  |  |  |  |
|           |   |                                   |  |  |  |  |
|           |   |                                   |  |  |  |  |
|           |   |                                   |  |  |  |  |
|           |   |                                   |  |  |  |  |
| 5.        | If there are no members, enter the name and address of the person appointed to wind up the company's  |                                   |  |  |  |  |
|           | activities and affairs: Deborah Wevadomski ====================================   |                                   |  |  |  |  |
|           | 8210 Lakewood Ranch BLVD ES S   | 35.8.A                            |  |  |  |  |
|           | Lakewood Ranch FL 34212 SER TO  | Cardang<br>G<br>Grinang<br>Finang |  |  |  |  |
|           |   | 241                               |  |  |  |  |
| 6.<br>li: | Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:                                   | Giral.                            |  |  |  |  |
| 7         | Deharah Manadanasiri  |                                   |  |  |  |  |
|           | Signature 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: <u>IMPRESSIONS REALTY GROVP</u> Document number of Limited Liability Company is: <u>L14000128005</u> Date of dissolution was: <u>9-14-2014</u> | _LL<br>_            | C  |
|---|---------------------|--|
| Description of information that must be included in a written claim:  |                     |  |
| No clausis outstanding  | <del></del>         |  |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  Debutah Mevadomski  3210 Lakewood Ranch BUD  Lakewood Ranch FL 34212           | 14 SEP 12 AM 11: 42 | The state of the s |
|   |                     |  |

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.

Printed Name of the Person Filing

ionature of the Person Filin

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