

L20000190168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

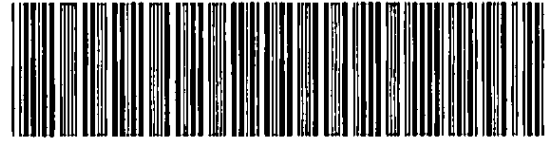
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/31/21--01008--012 **25.00

2021 FEB 3 PM 1:52

L L CRITCHE

DEC 08 2021
I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sanford Relief Fund LLC

DOCUMENT NUMBER: L20000190168

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John D Whigham

(Name of Contact Person)

Sanford Relief Fund LLC

(Firm/Company)

200 E Commercial St #4

(Address)

Sanford, FL 32771

(City/State and Zip Code)

For further information concerning this matter, please call:

John D Whigham

at (407) 915 6847

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25 Filing Fee

\$30 Filing Fee &
Certificate of Status

\$55 Filing Fee &
Certified Copy
(Additional copy is enclosed)

\$60 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



2021 DEC -3 AM 8:14

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 23, 2021

JOHN D. WHIGHAM
200 E. COMMERCIAL ST #4
SANFORD, FL 32771

SUBJECT: SANFORD RELIEF FUND LLC
Ref. Number: L20000190168

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

The document is incomplete as a description of information that must be included in a written claim was not completed.

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.

Irene Albritton
Regulatory Specialist III

Letter Number: 621A00028453



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 NOV 22 PM 12:37

June 5, 2021

JOHN D. WHIGHAM
200 E. COMMERCIAL ST #4
SANFORD, FL 32771

SUBJECT: SANFORD RELIEF FUND LLC
Ref. Number: L20000190168

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 321A00012265

Notice of Limited Liability Company Dissolution

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: Sanford Relief Fund LLC

Document number of Limited Liability Company is: L2000190168

Date of dissolution was: 4/30/2021

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

Name of claimant

Amount of claim

Basis for claim

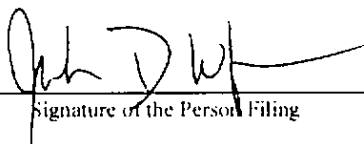
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

200 E. Commercial St #4

Sanford, FL 32771

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.

John D Whigham
Printed Name of the Person Filing


Signature of the Person Filing

2021 APR -9 PM 1:52