

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

**LLC DISSOLUTION OR WITHDRAWAL
SMITH LAND, LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

2019 FEB 28 11:10:45

2019 FEB 28 AM 11:11
STATE
FALL A HASSEE, FL

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S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Smith Land, 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:

Julie Rickaby

(Name of Person)

Kenneth A Woloson Law Office

(Firm/Company)

1980 Festival Plaza Dr, Ste 300

(Address)

Las Vegas, NV 89135

(City/State and Zip Code)

For further information concerning this matter, please call:

Julie Rickaby

(Name of Person)

at (702) 856-4682

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &
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

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

1. The name of a limited liability company is

Smith Land, LLC

2. The Articles of Organization were filed on 08/01/2002 and assigned

document number L02000019580

3. The delayed effective date the dissolution is not effective on the date of filing: 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).

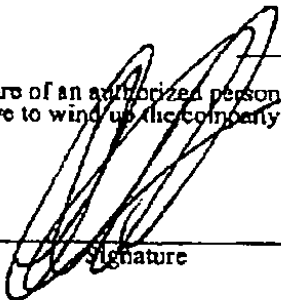
The consent of all members.

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

3321 N. Buffalo Drive, Ste. 200

Las Vegas, NV 89129

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:



Stuart P. Smith

Printed Name

FILING FEE: \$25.00

DEPARTMENT OF STATE
TALLAHASSEE, FL

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FILED