Division of Corporations

Page 1 of 1



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.

(((H19000300409 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (350)617-6383

Prom:

Account Name : SHUTTS & BOWEN LLF

Account Number : 120060000106 : (313)229-8900 Phone : (313)229-8901 Fax Number

LLC DISSOLUTION OR WITHDRAWAL MATOAKA INVESTMENTS, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu — Corporate Filing Menu

Help

T GLASS

OCT 1 0 2019

(((H19000300409.3)))

## ARTICLES OF DISSOLUTION

OF

## MATOAKA INVESTMENTS, L.L.C.

FIRST: The name of the Company is MATOAKA INVESTMENTS, L.L.C..

SECOND: The Articles of Organization were filed on November 8, 2002 and assigned document number L02000030067.

THIRD: The delayed effective date of the dissolution, if not effective on the date of

FOURTH: The occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes: Substantially all of the assets of the Company have been sold or disposed of.

DATED this g day of October, 2019.

(((H19000300409 3)))

## 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: MATOAKA INVESTMENTS, L.L.C.

Document number of Limited Liability Company is: <u>L02000030067</u>

Date of dissolution is: UCHOLORY 9, 2019

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

Documentary and factual basis for claim; legal name and address of claimant entity or person; date upon which and reason why claim arose; asserted damages by both, amount and type; whether a claim for attorney's fees or costs is involved; and claimants knowledge of any third party or indemnifying party with an interest in the alleged claim.

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

c/o John Patterson Shutts & Bowen LLP 1858 Ringling Boulevard, Suite 300 Sarasota, FL 34236

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 Patterson

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

(((H190003004093)))