

LO4000034505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

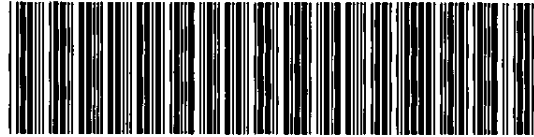
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

BK

Office Use Only



700082474167

RECEIVED

06 DEC 22 PM 3:10
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

06 DEC 22 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Drive, Suite A Tallahassee, FL 32301

PHONE: (850) 216-0457; FAX: (850) 216-0460

DATE: 12-22-06

NAME: SEEDTREE, LLC

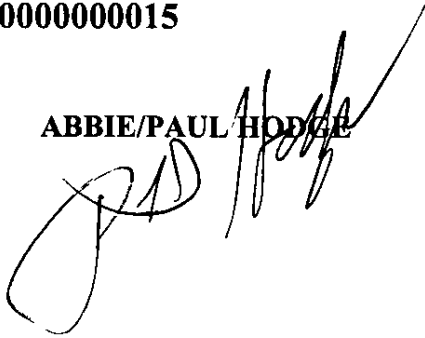
TYPE OF FILING: DISSOLUTION

COST: \$25 + \$30= \$55

RETURN: CERTIFIED COPY

ACCOUNT: FCA0000000015

AUTHORIZATION: ABBIE/PAUL HODGE



FILED
06 DEC 22 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FILED
06 DEC 22 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the limited liability company is Seedtree, LLC

2. The effective date of the limited liability company's dissolution is _____

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to
Section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

By written consent of the sole member.

4. **CHECK ONE:** N/A

☐ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

5. All remaining property and assets have been distributed among its members in accordance with their
respective rights and interests.

6. **CHECK ONE:**

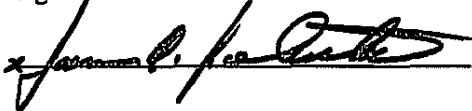
☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree, which may
be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the
dissolution:

Signature



Typed or Printed name

James A. Johnston

Filing Fee: \$25.00