# L05 000000 4556

| (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: |   |  |  |  |  |
|   |   |  |  |  |  |
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|   |   |  |  |  |  |

Office Use Only



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SECRETARY OF STATE

D. BRUCE AUG 15 2020

## **COVER LETTER**

| Divisio   | on of Corporations   |       |  |  |  |  |
|---|--|-------|--|--|--|--|
| SUBJECT: F  | FISHER PLANTATION, LLC   |       |  |  |  |  |
| (Name of Limited Liability Company)   |  |       |  |  |  |  |
|   |  |       |  |  |  |  |
| The enclosed Ar   | rticles of Dissolution and fee(s) are submitted for filing.  |       |  |  |  |  |
| Please return all   | correspondence concerning this matter to the following:  |       |  |  |  |  |
|   |  |       |  |  |  |  |
|   | Andrew J. Orosz  |       |  |  |  |  |
|   | (Name of Person)   |       |  |  |  |  |
|   |  |       |  |  |  |  |
| (Firm/Company)  |  |       |  |  |  |  |
|   |  |       |  |  |  |  |
|   | 605 Commonwealth Avenue  |       |  |  |  |  |
| (Address)   |  |       |  |  |  |  |
|   | Orlando, Florida 32803   |       |  |  |  |  |
|   | (City/State and Zip Code)  |       |  |  |  |  |
|   | AGE OF THE PROPERTY OF THE PRO | []    |  |  |  |  |
| (City/State and Zip Code)  For further information concerning this matter, please call:   |  |       |  |  |  |  |
| <b>A</b> .  |  | ٠,٣   |  |  |  |  |
| Aoros   | sz@hcpland.com at (407 ) 988-1403 (Area Code & Daytime Telephone Number 25)  |       |  |  |  |  |
|   | (Name of Person) (Area Code & Daytime Telephone Number 77 7 7 7  | 90.00 |  |  |  |  |
| Englished is a above  | (Name of Person)  (Name of Person)  (Area Code & Daytime Telephone Number)  (Area For the following amount:  |       |  |  |  |  |
| Enclosed is a circu   | ck 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) |  |       |  |  |  |  |
|   |  |       |  |  |  |  |
|   |  |       |  |  |  |  |

TO:

Registration Section

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

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1.  | . The name of a limited liability company is                    |   |   |                   |                        |                     |
|---|---|---|---|-------------------|------------------------|---------------------|
| FISHER PLANTATION, LLC, a Florida limited liability company |   |   |   |                   |                        |                     |
| 2.  | The Articles of Organization                                    | were filed onJanua  | ry 14, 2005                                   | _ and assigned    |                        |                     |
|   | document number <u>L05000</u> 6                                 | 004556  | _   |                   |                        |                     |
| 3.  | teffective of Note: If the date inserted in the                 | ate the dissolution if not effective on the date of filing: |   |                   |                        |                     |
| 4.  | A description of occurrence t<br>605.0707, Florida Statutes, (c | hat resulted in the limi<br>opy 605.0707 on back            | ited liability company's di<br>cover letter). | ssolution pursua  | nt to sect             | ion                 |
|   | The company has conclud   | ed its business in ac                                       | cordance with the term                        | is of the Article | s of                   | _                   |
|   | of its property in the ordinand/or creditors.                   |   |   |                   |                        | -                   |
| 5.  | If there are no members, ente                                   | r the name and address                                      | s of the person appointed t                   | o wind up the co  | om <del>pany</del> i s | 202                 |
|   | activities and affairs:   | Andrew J. Orosz, E  | sq.   |                   |                        | ر<br>اے             |
|   |   | 605 Commonwealt   | h Avenue                                      |                   | TAR                    | -<br>1UN 29         |
|   |   | Orlando, Florida 32   | 2803  |                   |                        | A 5                 |
|   |   |   |   |                   | FIE                    | ): I <sub>1</sub> 8 |
| 6.<br>ab  | Signature of an authorized peove to wind up the company's       | rson or if there are no activities and affairs:             | members, the signature of                     | the person appo   | ointed and             | 1 listed            |
|   | Melso   | 7   | Andrew J. Orosz                               |                   |                        |                     |
|   | Signature (   | <del></del>   | 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: FISHER PLANTA   | ATION, LLC                               |
|--|--|
| Document number of Limited Liability Company is: L050  | 000004556                                |
| Date of dissolution was:June 23, 2020  |  |
| Description of information that must be included in a writt  | en claim:                                |
| A detailed description of the claim together with rea  | sonable evidence in support of the same, |
| together with an explanation of the basis for the alle   | eged liability of the company.           |
|  |  |
|  |  |
|  | ZO JU<br>TALI                            |
| Mailing address where claims can be sent: (Claims cannot   | be sent to the Division of Corporations) |
| FISHER PLANTATION, LLC, a dissolved Flo  | orida limited liability company          |
| Attn: Andrew J. Orosz, Esq.  | · m &                                    |
| 605 Commonwealth Avenue  | <del></del>                              |
| Orlando, Florida 32803   |  |
| A claim against the above named limited liability company claim is commenced within 4 years after the filing of this r |  |
| Andrew J. Orosz, Esq.  Printed Name of the Person Filing   | Simular of the Barrer Fills              |
| Timed Name of the Ferson Finng   | Signature of the Person Filing           |

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