L05000015293

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Listings Littly (1817)				
(Document Number)				
(Document Number)				
Contificat Continu				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
45/18				
9 5/18				

Office Use Only



000404581680

03/15/23--01027--020 **25.00

SECRETARY OF JULY 20

COVER LETTER

.

TO:	Registration Section Division of Corporations					
Lightkeeper's Park LLC SUBJECT:						
(Name of Limited Liability Company)						
	closed Articles of Dissolution and fee(s) are submit	-				
	Merinda Mazie					
	(Name of Person)					
(Firm/Company)						
5001 64th Drive West						
	(Address)					
	bradenton, FL 34210					
(City/State and Zip Code)						
For further information concerning this matter, please call:						
	Merinda Mazie	941 545-4839 at ()				
	(Name of Person)	(Area Code & Daytime Telephone Number)				
Enclosed	d is a check for the following amount:					
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
		Street Address: Registration Section Division of Corporations The Centre of Tallahassec				
		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED 2023 HAR 15 AM 10: 26

1.	The name of a limited liability company is Lightkeeper's Park LLC		SECRETARY OF US FALL AHASSEE, FUS ————————————————————————————————————
2.	The Articles of Organization were filed on $\frac{2}{3}$	/14/2005	_ and assigned
	document number L05000015293		
3.	The delayed effective date the dissolution if (effective date cannot be prior Note: If the date inserted in this block does not listed as the document's effective date on the Delayer of	r to or more than 90 days later than date of meet the applicable statutory filing t	document is received for filing)
1.	A description of occurrence that resulted in t 605.0707, Florida Statutes, (copy 605.0707 o	the limited liability company's di	ssolution pursuant to section
	the consent of all members	• • • • • • • • • • • • • • • • • •	
5,	If there are no members, enter the name and	address of the person appointed t	o wind up the company's
	activities and affairs:		
	<u></u>	, , , , , , , , , , , , , , , , , , ,	
5. ab	Signature of an authorized person or if there ove to wind up the company's activities and a	are no members, the signature of	the person appointed and listed
1,	rida Marie	Merinda Mazie	
T	Signature	Printed	Name

FILING FEE: \$25.00