

Oct. 29. 2024 2:28PM

No. 2399 P. 1

10/29/24, 1:59 PM

Division of Corporations

Florida Department of State
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Electronic Filing Cover Sheet

LO6000021345

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((H24000360413 3)))



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

From:
Account Name : PETERSON & MYERS PA
Account Number : 120080000078
Phone : (863)683-6511
Fax Number : (863)688-8099

LLC DISSOLUTION OR WITHDRAWAL
PENBROOKS PROPERTIES I, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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T. LEMIEUX
OCT 30 2024

Oct. 29, 2024 2:28PM

No. 2399 P. 2

Docusign Envelope ID: 23F6FC78-2C12-430C-8B60-9C8F8DB3505B

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PENBROOKS PROPERTIES I, 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:

AMANDA L. WALLS, ESQ
(Name of Person)
PETERSON & MYERS, P.A.
(Firm/Company)
225 EAST LEMON STREET, SUITE 300
(Address)
LAKELAND, FLORIDA 33801
(City/State and Zip Code)

For further information concerning this matter, please call:

AMANDA L. WALLS, ESQ. at 863 683-6511
(Name of Person) (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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of a limited liability company is
PBNBROOKS PROPERTIES I, LLC
2. The Articles of Organization were filed on 02/28/2006 and assigned
document number L06000021345
3. The delayed effective date the dissolution if not effective on the 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 sole member of the limited liability company consents to the dissolution pursuant to
Section 605.0701(2) Florida Statutes.
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: _____

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:



Signature

Dr. Thomas H. Newsom, as its Manager

Printed Name

FILING FEE: \$25.00

(((H24000360413 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: PENBROOKS PROPERTIES I, LLC

Document number of Limited Liability Company is: 106000021345

Date of dissolution was: _____

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

Name, address, telephone number, email address of claimant along with a detailed description of the claim including the date on which the claim was incurred and the total amount sought in the claim.

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

Peterson & Myers, P.A.

225 East Lemon Street, Suite 300

Lakeland, Florida 33801

Attn: Amanda L. Walls, Esq.

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.

Dr. Thomas H. Newson, as its Manager

Printed Name of the Person Filing

THN

Signature of the Person Filing

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