# 106000113422

(	Requestor's Name)	<u>.</u>
(	Address)	
	Address)	
	City/State/Zip/Phone #)	
PICK-UP	WAIT [	MAIL
	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Sta	atus
Special Instructions to Filing Officer:		

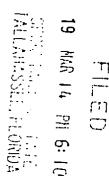




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MAR 2 6 2019 S. YOUNG



#### · COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

## 9760 EAST INDIGO 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:

MCHUGH, JOHN B.

(Name of Person)

9760 EAST INDIGO LLC

(Firm/Company)

15731 Capital Spending Rd.

(Address)

Westfield, IN 46074

(City/State and Zip Code)

For further information concerning this matter, please call:

John B. McHugh

 $_{\odot}305$ 

6666910

(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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### **Notice of Limited Liability Company Dissolution**

#### **NOTE:** This page is optional

John B. McHugh

Printed Name of the Person Filing

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.

Document number of Limited Liability Company is: L060001134	<u>C</u> 22
Date of dissolution was:	·
Description of information that must be included in a written claim:	<b>五</b> 8
Property sold	MAR 14 P
	P. P.
	<u> </u>
	ion of Corporations)
Mailing address where claims can be sent: (Claims cannot be sent to the Divis  15731 Capital Spending Rd  Westfield, IN 46074	ion of Corporations)
15731 Capital Spending Rd	ion of Corporations)
15731 Capital Spending Rd	ion of Corporations)

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

Signature of the Person Filing

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

1. The name of a limited liability company is	
9760 East Indigo LLC	
2. The Articles of Organization were filed on $\frac{Nc}{2}$	ovember 27, 2006 and assigned
document number L06000113422	
3. The delayed effective date the dissolution if n teffective date cannot be prior to Note: If the date inserted in this block does not n listed as the document's effective date on the Dep	o or more than 90 days later than date document is received for filing) neet the applicable statutory filing requirements, this date will not be
<ol> <li>A description of occurrence that resulted in th 605.0707, Florida Statutes, (copy 605.0707 on Property Sold</li> </ol>	ne limited liability company's dissolution pursuant to section back cover letter).
respectly som	
	A STATE OF THE STA
	STE. 1
i. If there are no members, enter the name and acactivities and affairs:	ddress of the person appointed to wind up the company's
activities and arrairs:	<del></del>
. Signature of an authorized person or if there a isted above to wind up the company's activities a	re no members, the signature of the person appointed and and affairs:
Shin.	
X Jame Miller	John B McHugh
Signature	Printed Name

FILING FEE: \$25.00