

L07000019049

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

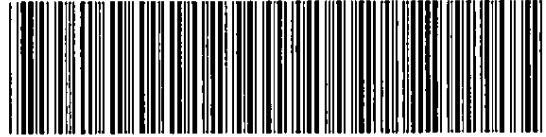
(Document Number)

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FEB 21 2023

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Handwritten signature



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 6, 2023

PAUL ADAMS  
GRASSLAKE ENTERPRISES LLC  
P O BOX 915221  
LONGWOOD, FL 32791-5221

SUBJECT: GRASS LAKE ENTERPRISES, LLC  
Ref. Number: L07000019049

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6923.

RoseAnn Varnadore  
Chief, Commercial Information Services

Letter Number: 123A00010285

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GRASS LAKE Enterprises, 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:

Paul Adams  
(Name of Person)

GRASS LAKE ENTERPRISES, LLC  
(Firm/Company)

PO BOX 915221  
(Address)

Longwood, FL 32791-5221  
(City/State and Zip Code)

For further information concerning this matter, please call:

Paul Adams at ( 407 ) 703-3536  
(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

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

1. The name of a limited liability company is

GRASS LAKE ENTERPRISES

2. The Articles of Organization were filed on \_\_\_\_\_ and assigned

document number LO 2000019049

3. The delayed effective date the dissolution if not effective on the date of filing: Dec 15, 2002  
(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).

Dissolution was approved by the share holders,  
in the manner required by this chapter and articles

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Paul Adams

PO Box 915221

Longwood, FL 32791-5221

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:

Paul Adams

Signature

Paul Adams

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: GRASS LANE ENTERPRISES, LLC

Document number of Limited Liability Company is: LO7000019049

Date of dissolution was: Dec. 15, 2022

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

Person for claim, address, date, name of person  
filing claim

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

PO Box 915221  
Longwood FL 32791-5221

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.

Paul Adh  
Printed Name of the Person Filing

Paul Adh  
Signature of the Person Filing