

207000021380

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

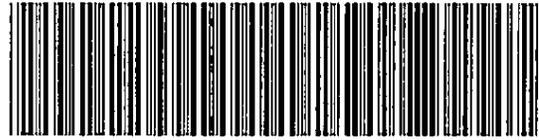
(Document Number)

Certified Copies _____ Certificates of Status _____

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[Handwritten scribbles]

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05/03/22--01024--021 **35.00

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2022 MAY -3 PM 1:51
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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

1. The name of a limited liability company is
Big Pine, LLC

2. The Articles of Organization were filed on 01/17/2007 and assigned
document number L07000021380

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 consent of all the members.

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TALLAHASSEE, FLORIDA

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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

63 Disalvo Place

Apopka, FL 32712

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

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: Big Pine, LLC

Document number of Limited Liability Company is: 1.07000021380

Date of dissolution was: December 30, 2021

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

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

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TALLAHASSEE, FLORIDA

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

Paul Adams

63 Disalvo Place

Apopka, FL 32712

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 Adams

Printed Name of the Person Filing



Signature of the Person Filing

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