L07000045927

(Re	questor's Name)	
(Ad	dress)	
DA)	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	_	





100280263251

12/30/15--01026--015 **175.00

FILED
2015 DEC 30 PK 4: 52

K.SALY EXAMINER IAN - 4

COVER LETTER

Division of Corporations
SUBJECT: O45.5 HIGHLAND LLC (Name of Limited Liability Company)
(Name of Emmed Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
HELENA VANDERWEY (Name of Person)
(Name of Person)
OASIS HIGHLAND LLC (Firm/Company)
46
2062 20th AVE SE (Address)
(Address)
LARGO, FL 3377/ (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
· · · · · · · · · · · · · · · · · · ·
HELENA VANDER WEY at (503) 982-0880 (Area Code & Daytime Telephone Number)
(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:

TO:

Registration Section

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

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

2015 DEC 30 PM 4:52 1. The name of a limited liability company is 2. The Articles of Organization were filed on _____O4/30/07 and assigned document number <u>407000045927</u> 3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/15 (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). 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:

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

FILED	
2015 DEC 30 PK 4: 52	
ALT ME MARY OF	>

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of $\Omega_{R(i)}$, 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: OA 5 i 5 HIGHLAND LLC Document number of Limited Liability Company is: L07000045927
Document number of Limited Liability Company is: 407000645927
Date of dissolution was: $\frac{12/31/15}{1}$
Description of information that must be included in a written claim:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
HELENA VANJEZWEY
1-1616NA VANJERWEY 2062 20th AVE SE LARGO, FL 33771
LARGO, FL 33771

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.

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