

L 07-000057610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

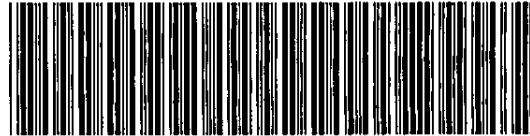
(Document Number)

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FILED  
2016 APR 25 PM 12:09  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

for 5/4

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** **FALGREEN 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:

**ALAN CHASAN CPA**

(Name of Person)

**POSSES & CHASAN CPAS PLLC**

(Firm/Company)

**100 N CENTRE AVENUE**

(Address)

**ROCKVILLE CENTRE NY 11570**

(City/State and Zip Code)

For further information concerning this matter, please call:

**ALAN CHASAN**

(Name of Person)

at ( **516** ) **764-4002**

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 11, 2016

POSSES & CHASAN CPAS PLLC  
ATTN: ALAN CHASAN CPA  
100 N CENTRE AVE  
ROCKVILLE CENTRE, NY 11570

SUBJECT: FALGREEN, LLC  
Ref. Number: L07000057610

We have received your document for FALGREEN, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

The Notice of Dissolution must contain a description of information that should be included in a written claim.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan  
Senior Section Administrator

Letter Number: 916A00007325

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

FILED  
2016 APR 25 PM 12:09  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1. The name of a limited liability company is

FALGREEN LLC

2. The Articles of Organization were filed on 5/31/2007 and assigned

document number L07000057610

3. The delayed effective date the dissolution if not effective on the date of filing: 3/1/2016  
(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 VOTE and written CONSENT of the majority of the  
members of the Limited Liability Company

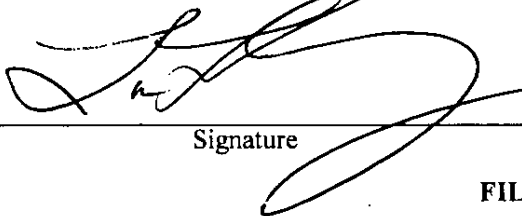
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: LORI FALCO GREENBERG

60 WOLVER HOLLW RD GLEN HEAD NY 11545

HARLOD GREENBERG

60 WOLVER HOLLW RD GLEN HEAD NY 11545

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

LORI FALCO GREENBERG

Printed Name

**FILING FEE: \$25.00**

**Notice of Limited Liability Company Dissolution**

FILED  
2016 APR 25 PM 12:09  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**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: FALGREEN LLC

Document number of Limited Liability Company is: L07000057610

Date of dissolution was: 3/1/2016

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

THE LLC WILL BE DISSOLVED BY MAJORITY CONSENT OF ALL LLC  
MEMBERS

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

POSSES & CHASAN CPAS PLLC

100 N CENTRE AVENUE

ROCKVILLE CENTRE NY 11570

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.

LORI FALCO GREENBERG

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**