

407000110556

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

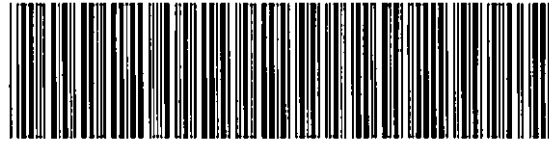
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400320108174

12/11/18--01011--015 \*\*25.00

FILED  
18 DEC 11 AM 11:38  
TALLAHASSEE, FLORIDA

K SALY

DEC 19 2018

# RothBlair

Roth Blair Roberts Strasfeld & Lodge

ATTORNEYS AT LAW

ROTH BLAIR ROBERTS STRASFELD & LODGE  
ATTORNEYS AT LAW  
1000 UNIVERSITY AVENUE, SUITE 1000  
TALLAHASSEE, FLORIDA 32310-3000  
TEL: 904.437.1000 FAX: 904.437.1001  
WWW.ROTHBLAIR.COM

December 3, 2018

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

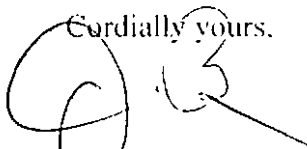
RE: *Palm Coast PKWY LLC*  
*Doc. #L07000110556*

To Whom It May Concern:

Enclosed for filing are an original and one copy of a Cover Letter, Articles of Dissolution for a Limited Liability Company, and Notice of Limited Liability Company Dissolution. Also enclosed is a check in the amount of \$25.00 representing your filing fee.

Please feel free to contact me if you have any questions.

Cordially yours,



JOSEPH C. BISHARA, ESQ.

cc: Henry DiRienzo

JCB:kr

Enclosure

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Palm Coast PKWY 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:

Joseph C. Bishara, Esq.

(Name of Person)

Roth, Blair, Roberts, Strasfeld & Lodge

(Firm/Company)

100 East Federal Street, Suite 600

(Address)

Youngstown, OH 44503

(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph C. Bishara, Esq. at ( 330 ) 744-5211

(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

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED  
18 DEC 11 AM 11:38  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Palm Coast PKWY LLC

2. The Articles of Organization were filed on October 31, 2007 and assigned

document number L07000110556

3. The delayed effective date the dissolution if not effective on the date of filing: N/A

(effective date cannot be prior to or more than 90 days later than date document is received for filing)

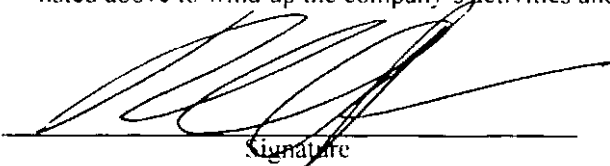
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 limited liability company is dissolved pursuant to the consent of its sole member. Section 605.0701(2).

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

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

Henry DiRienzo

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: Palm Coast PKWY LLC

Document number of Limited Liability Company is: L07000110556

Date of dissolution was:                       
Upon approval by the Department of State of Florida

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

In the written claim, state: (1) the name of the claimant; (2)  
the amount of the claim; (3) the nature of the claim; (4) identify  
an invoice or other document associated with the claim; and  
(5) any other information necessary to allow the company to  
identify the claim.

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

Attention: Henry DiRienzo

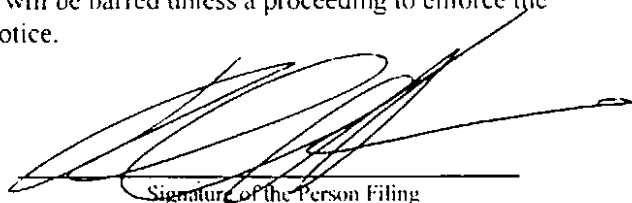
926 Boardman-Poland Road

Boardman, OH 44512

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.

Henry DiRienzo

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**

FILED  
18 DEC 11 AM 11:38  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA