

L08000011781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

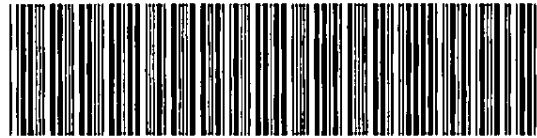
(Document Number)

Certified Copies _____

Certificates of Status ☒

Special Instructions to Filing Officer:

Office Use Only



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FEB 03 2021

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7/28/2020 23:41:35

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Walker Fam, 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:

Brenda J. Walker

(Name of Person)

(Firm/Company)

2920 Canal Drive

(Address)

Panama City, FL 32405

(City/State and Zip Code)

For further information concerning this matter, please call:

Scott B. Barloga

(Name of Person)

850

252-1915

at (

_____) _____
(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

Walker Fam. LLC

2. The Articles of Organization were filed on 2/1/2008 reinstated 11/23/2010 and assigned

document number L08000011781

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).

Dissolution was approved unanimously by the Members. The number of votes cast for dissolution
was sufficient for approval.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Brenda J. Walker, 2920 Canal Drive, Panama City, FL 32405

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:

B. J. Walker

Signature

Brenda J. Walker

Printed Name

FILING FEE: \$25.00

777 DEC 28 AM 9:35

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: Walker Fam, LLC

Document number of Limited Liability Company is: L08000011781

Date of dissolution was: Dec. 10, 2020

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

Provide a reasonable description of the claim that the claimant may be entitled to assert with
supporting documentation.

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

Brenda J. Walker

2920 Canal Drive

Panama City, FL 32405

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.

Brenda J. Walker

Printed Name of the Person Filing

B. Walker

Signature of the Person Filing

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