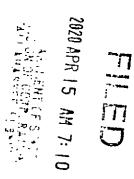
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Office Use Only



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APR 2 8 2020 S. YOUNG

### **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJ	HENDRY FARM, LLC ECT:				
		d Liability Company)			
The er	nclosed Articles of Dissolution and fee(s) are submitte	ed for filing.			
Please	return all correspondence concerning this matter to the	ne following:			
	HARRY O. HENDRY				
(Name of Person)					
HENDRY LAW FIRM, P.A.					
	(Firm/Company)				
	POST OFFICE BOX 1509				
	(Address)				
	FORT MYERS, FLORIDA 33902				
(City/State and Zip Code)					
For further information concerning this matter, please call:					
	HARRY O. HENDRY	239 332-7123 at ()			
	(Name of Person)	at ()(Area Code & Daytime Telephone Number)			
Enclos	ed 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:		Street Address: Registration Section			
Registration Section Division of Corporations		Division of Corporations			
	P.O. Box 6327	The Centre of Tallahassee			
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

. The name of a limited liability of HENDRY FARM, LLC	company is		
. The Articles of Organization we	ere filed on <u>05/19/2008</u>	and ass	igned
document number L0800004954	15		
The delayed effective date the deflective date  Note: If the date inserted in this belisted as the document's effective	block does not meet the applicable	e statutory filing requiremen	731 /2020 received for filing) nts. this date will not be
A description of occurrence tha 605.0707. Florida Statutes, (cop CONSENT OF THE MEMBERS	t resulted in the limited liability 605.0707 on back cover lette	y company's dissolution r).	pursuant to section
<del></del>			
If there are no members, enter the activities and affairs:	he name and address of the per	rson appointed to wind up	the company's
_			
_			-
Signature of an authorized person ove to wind up the company's ac	on or if there are no members. tetivities and affairs:	the signature of the perso	n appointed and liste
4704	HARRY	O. HENDRY	2020
Signature	<del>-/</del>	Printed Name	2020 APR 15
	FILING FEE: \$25.0	00	Sold M
			4.5 "

### 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:	
Document number of Limited Liability Company is: L0800004	9545
Date of dissolution was:	
Description of information that must be included in a written c	laim:
STATE THE NAME AND ADDRESS OF THE CLAIMANT, STA	TE THE NATURE OF THE CLAIM
STATE WHETHER OR NOT THE CLAIM IS BASED UPON A W	/RITTEN AGREEMENT OR DOCUMENT
STATE IF THE CLAIM IS CONTINGIENT OR LIQUIDATED	
STATE IF THERE ARE ANY OTHER PARTIES INVOLVED RE	GARDING THE CLAIM
STATE IF THE CLAIMANT HAS RECIVED OTHER COMPENS	ATION OR PAYMENT FOR THE CLAIM
Mailing address where claims can be sent: (Claims cannot be s	sent to the Division of Corporations)
P.O. BOX 1509	
FORT MYERS, FLORIDA 33902	
A claim against the above named limited liability company wi claim is commenced within 4 years after the filing of this notic	
HARRY O. HENDRY	.to70 17
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