20000110863

(Requestor's Name)		
(Address)	3003788048	
(Address)	0000700040	
(City/State/Zip/Phone #)	01/03/2201921009	
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status	; ; ; ;,• ;	
Special Instructions to Filing Officer:		
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Office Use Only



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COVER LETTER

	egistration Section livision of Corporations						
SUBJECT	BANYAN MANAGEMENT GROUP LLC						
SOBILCI	(Name of Limited Liability Company)						
	sed Articles of Dissolution and fee(s) are submi						
	Raymond G. Robison						
	(Name of Person)						
Fox McCluskey Bush Robison, PLLC							
	(Firm/Company)						
	3461 SE Willoughby Blvd.						
		(Address)					
	Stuart, FL 34994						
	(City/St	ate and Zip Code)					
For further	information concerning this matter, please call						
R	aymond G. Robison	at (
_	(Name of Person)	(Area Code & Daytime Telephone Number)					
Enclosed is	a check for the following amount:						
. 🗆 s :	25.00 Filing Fee and Certificate of Dissolution	E \$55.00 Filing Fee, Certificate of Dissolution &					
R D P.	lailing Address: egistration Section livision of Corporations O. Box 6327 allahassee, 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
	BANYAN MANAGEMENT GROUP LLC
2.	The Articles of Organization were filed on December 3, 2008 and assigned
	focument numberL08000110863
3.	The delayed effective date the dissolution if not effective on the date of filing: 12/31/2021 (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 05.0707, Florida Statutes, (copy 605.0707 on back cover letter).
_	Consent of all Members
-	Consent of all Members
(onsent of all Members
	CC 23
	f there are no members, enter the name and address of the person appointed to wind up the company's inectivities and affairs:
	<u> </u>
5. abc	Signature of an authorized person or if there are no members, the signature of the person appointed and listed we to wind up the company's activities and affairs:
λ	Graham Stikelether, Manager
	Signature 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:	MENT GROUP LLC	
Document number of Limited Liability Company is:	000110863	
Date of dissolution was: December 31, 2021		
Description of information that must be included in a writ	ten claim:	
Name and Address of Claimant		_
Amount of Claim		
Whether Claim is Secured or Contingent		_
Detailed Description of Type of Claim		
Date Claim Arose	C	2322
Mailing address where claims can be sent: (Claims cannot	be sent to the Division of Corporations)	JKW -3 P
C/O Graham Stikelether		P1:
801 S. Ocean Drive, #1001 45 PNCKNE	Y LANDING DR	<u>က</u>
Ft. Pierce, FL 34949 SHELAON, SO	2 3794)	
A claim against the above named limited liability companiclaim is commenced within 4 years after the filing of this i		: the
out the state of the	k	
Graham Stikelether, Manager Printed Name of the Person Filing	Signature of the Person Filing	
tinged transc of the reison rining	official of air terson time	

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