

12/23/2015 09:08 FAX

GUNSTER, YOKLEY, ET

0003/005

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : GUNSTER, YOKLEY & STEWART, P.A.
Account Number : 076117000420
Phone : (561) 650-0728
Fax Number : (561) 671-2527

**LLC DISSOLUTION OR WITHDRAWAL
EVERGREEN LAKES LLC**

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12/23/2015 09:18 FAX
12/22/2015 18:05 FAX

GUNSTER YOAKLEY
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*** TX REPORT ***

TRANSMISSION OK

TX/RX NO 0075
RECIPIENT ADDRESS 18506176383#053
DESTINATION ID
ST. TIME 12/22 18:04
TIME USE 00'38
PAGES SENT 3
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Division of Corporations

Page 1 of 1

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GUNSTER YOAKLEY

001/005

850-617-6381

12/23/2015 9:05:52 AM PAGE 1/001 Fax Server



December 23, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EVERGREEN LAKES LLC
4225 SW BIMINI CIRCLE SOUTH
THE EVERGREEN CLUB
PALM CITY, FL 34990

SUBJECT: EVERGREEN LAKES LLC
REF: L09000074553

PLEASE FILE EFFECTIVE THE ORIGINAL SUBMISSION
DATE OF DECEMBER 22, 2015. THANK YOU.

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The effective date must be specific and cannot be prior to the date of filing.

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.

Deborah Bruce
Regulatory Specialist II

FAX Aud. #: H15000301802
Letter Number: 415A00026823

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TALLAHASSEE, FLORIDA

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**ARTICLES OF DISSOLUTION
FOR A
FLORIDA LIMITED LIABILITY COMPANY

EVERGREEN LAKES LLC**

Pursuant to Sections 605.0701 and 605.0707 of the Florida Revised Limited Liability Company Act (the "Act"), the undersigned hereby submits these Articles of Dissolution to the Florida Department of State:

1. The name of the limited liability company is EVERGREEN LAKES LLC (the "Company").
2. The Articles of Organization were filed with the Florida Department of State on August 03, 2009 and assigned Document Number L09000074553.
3. Pursuant to Section 605.0701 of the Act, dissolution was authorized by an Unanimous Written Consent of the Members of the Company, dated as of December 21, 2015.
4. All debts, obligations and liabilities of the Company have been paid or discharged.
5. All property and assets of the Company have been distributed to the members of the Company in accordance with the Act.
6. There are no suits pending against the Company in any court.
7. The effective date of the dissolution shall be December 31, 2015.

IN WITNESS WHEREOF, the undersigned hereby executes these Articles of Dissolution to be effective as of the 31st day of December, 2015.

EVERGREEN LAKES LLC

By: 

Name: Thomas D. O'Malley

Title: Member

FILED
15 DEC 23 AM 9:45
CLERK OF COUNTY OF FLORIDA

H15000301802 3

H15000301802 3

**NOTICE OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

This Notice of Limited Liability Company Dissolution is submitted by the dissolving limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in Section 605.0712, Florida Statutes.

Name of Limited Liability Company: EVERGREEN LAKES LLC.

Document Number of Limited Liability Company: L09000074553.

Date of Dissolution: December 31, 2015.


Description of Information that must be included in a written claim: The information that must be included in a claim submitted pursuant to this Notice shall be as follows:

- (a) Name, address and telephone number of claimant.
- (b) Amount of claim, including, if applicable, principal, interest, penalties or other fees or charges.
- (c) A statement of the basis for the claim.
- (d) A copy of any and all writings evidencing the claim or upon which the claim is based.
- (e) A statement of whether or not the claimant has other claims against the company or its managers, officers, agents or representatives, in their capacities as such, and, if the claimant states that the claimant has other claims, a statement of whether or not such other claims are being submitted pursuant to this Notice, or if such other claims will not be so submitted, a statement as to the reason why.

Mailing address where claims can be sent: A claim submitted pursuant to this Notice shall be mailed by certified or registered mail, return receipt requested, postage prepaid, to the following party: Corey P. Miller, 417 SE Coconut Avenue, Suite 1, Stuart, Florida 34996.

A claim against EVERGREEN LAKES LLC will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

EVERGREEN LAKES LLC

By: 
Name: Thomas D. O'Malley
Title: Member