

LO9 000 114 365

(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:

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04/26/21--01012--013 **25.00

FILED
JUN 25 2021
TALLAHASSEE, FL

2021 MAY 13 PM 2:54

FILED

D BRUCE

JUN 25 2021

Mary Ann Lunde
9127 Lazy Oak Court
Clermont, FL 324711

Ms. Deborah Bruce
Corporate Records Supervisor II
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

June 22, 2021

Dear Ms. Bruce:

I hope the enclosed signatures will resolve this issue. My husband, Blake Lunde, who served as an earlier Registered Agent and member, has advanced Alzheimer's disease and is no longer able to comprehend and/or sign business documents. If needed, I could have a notarized document forwarded to attest to this. Thank you in advance for your kind assistance.

Regards,



Mary Ann Lunde

352.978.9775

2021 MAY 13 PM 2:54
COUNTY CLERK
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 13, 2021

MARY ANN LUNDE
9127 LAZY OAK CT
CLERMONT, FL 34711

SUBJECT: BLAKE, LLC
Ref. Number: L09000114365

We have received your document for BLAKE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the members having the same percentage of membership interests necessary to approve the dissolution or the revocation when filing articles of revocation of dissolution.

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) 245-6842.

Deborah Bruce
Corporate Records Supervisor II

Letter Number: 421A00013089

2021 MAY 13 PM 2:54

END

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLAKE, 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:

MARY ANN LUNDE

(Name of Person)

BLAKE, LLC

(Firm/Company)

9127 LAZY OAK COURT

(Address)

CLERMONT, FL 34711

(City/State and Zip Code)

TALLAHASSEE, FL

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For further information concerning this matter, please call:

MARY ANN LUNDE

(Name of Person)

352

978-9775

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

BLAKE, LLC

2. The Articles of Organization were filed on 12/1/2009 and assigned

document number L09000114365

3. The delayed effective date the dissolution if not effective on the date of filing: 4/22/2021
(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 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

OWNER ILLNESS

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

MARY ANN LUNDE

9127 LAZY OAK COURT

CLERMONT, FL 34711

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:

Mary Ann Lund
Signature

MARY ANN LUNDE

Printed Name

FILING FEE: \$25.00

2021 MAY 13 PM 2:54
TALLAHASSEE, FL

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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: BLAKE, LLC

Document number of Limited Liability Company is: L090000114365

Date of dissolution was: 4/22/2021

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

ALL PERTINENT FACTS.

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

MARY ANN LUNDE

BLAKE, LLC

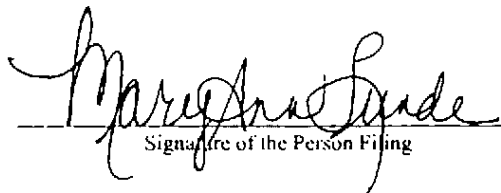
9127 LAZY OAK COURT

CLERMONT, FL 34711

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.

MARY ANN LUNDE

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

2021 MAY 13 PM 2:54
FILED
TALLAHASSEE, FL
DIVISION OF CORPORATIONS