# L1000014514

| (Re                                     | equestor's Name) |             |  |  |
|---|------------------|-------------|--|--|
| (Ac                                     | ldress)          |             |  |  |
| (Ac                                     | ldress)          |             |  |  |
| (City/State/Zip/Phone #)                |                  |             |  |  |
| PICK-UP                                 | ☐ WAIT           | MAIL        |  |  |
| (Business Entity Name)                  |                  |             |  |  |
| (Document Number)                       |                  |             |  |  |
| Certified Copies                        | Certificates     | s of Status |  |  |
| Special Instructions to Filing Officer: |                  |             |  |  |
|   |                  |             |  |  |
| :                                       |                  |             |  |  |
|   |                  |             |  |  |

Office Use Only



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16 MAY -2 PM 4: 56

MAY 03 2016 S. YOUNG

### **COVER LETTER**

TO:

Registration Section

Registration Section

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32314

| Division of Corporations   |       |   |
|--|-------|---|
| SUBJECT: VANGUARD IRRIGATION 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:  |       |   |
| DAVID MAYER (Name of Person)   |       |   |
| (Common of Contracting)  |       |   |
| (Firm/Company)   |       | TAGE OF THE PARTY |
| 1815 BACONS BRIDGE RD APT HIO (Address)  |       | CAHAS   |
|  | -2 PK |   |
| SUMMERVILLE SC 29485  (City/State and Zip Code)  |       |   |
| For further information concerning this matter, please call:   | 6     | יוני<br>בני   |
| DAVID MAYER at (850) 417 4884  (Name of Person) (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: STREET/COURIER ADDRESS  | S:    |   |

Registration Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1.        | The name of a limited liability company is   |
|-----------|--|
|           | VANGUARD IRRIGATION LLC  |
| 2.        | The Articles of Organization were filed on FEBRUARY 3, 2011 and assigned   |
|           | document number <u>L11000014514</u>  |
| 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).   |
|           | 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  PRINCIPAL AND SOLE MEMBER CEASED OPERATING  O   |
|           | IN BUSINESS TO TAKE EMPLOYMENT ELSEWHERE 3   |
|           | ້.<br>ປັ   |
| 5.        | If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:   |
|           |  |
|           |  |
|           |  |
| 6.<br>lis | Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:   |
|           | Wavid B Mayer DAVID B MAYER 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: VANGUARD IRRIGATION LLC   |                        |
|--|------------------------|
| Document number of Limited Liability Company is: <u>L11000014514</u>   |                        |
| Date of dissolution was: $\frac{12}{31}$ $\frac{2015}{2015}$   | する                     |
| Description of information that must be included in a written claim:   | ALLAHASSE<br>16 MAY -2 |
| Description of claim; dates of transactions; contact in formation  | MAY -2 PM 4: 56        |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  | ·                      |
| DAVID MAYER  |                        |
| 1815 BACONS BRIDGE RD  |                        |
| APT HIO  |                        |
| SUMMERVILLE SC 29485   |                        |
| A claim against the above named limited liability company will be barred unless a proceeding to enfociaim is commenced within 4 years after the filing of this notice. | orce the               |
| DAVID B MAYER  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