00044219

(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:
J DENNIS
JUL 1 2 2023
R-5-31-23

Office Use Only



100405782611

04/03/23--01019--002 **43.75

5.31.23

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Harvesthill JLP LLC (Name of Limited Liability)	Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filin	g.
Please return all correspondence concerning this matter to the following	ng:
Larry Powell S (Name of Person)	
Harvesthill JLP (Firm/Company)	<u> </u>
1820 Jackson A	Ve
Lehigh Acres FL (City/State and Zip Co	
For further information concerning this matter, please call:	
Larry Powell St at (S) (Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
☐ \$25.00 Filing Fee and Certificate of Dissolution ☐ \$55.0	00 Filing Fee, Certificate of Dissolution & rtified Copy (additional copy is enclosed)
	Address: ration Section
Division of Corporations Divisi	on of Corporations
P.O. Box 6327 The C	entre of Tallahassee
Tallahassee, FL 32314 2415 ? Tallah	N. Monroe Street, Suite 810 assee, FL 32303

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: Harvesthill JLP LLC
Document number of Limited Liability Company is: L110000 44219
Date of dissolution was: May 23, 2023
Description of information that must be included in a written claim:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Latry Powell St 1820 Tackson Ave Lehigh Acres, FL 339772-

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.

Printed Name of the Person Filing

Signature of the Person

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	HARVESTHILL SLP, LLC
2.	The Articles of Organization were filed on $04.13.2011$ and assigned document number 1000044219
3.	The delayed effective date the dissolution if not effective on the date of filing: May 23, 2023 (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).
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Larry Powell St 1820 Jackson Ave Lehigh Acres, FL 33977.
6. al	Signature of an authorized person or if there are no members, the signature of the person appointed and listed love to wind up the company's activities and affairs:
	Jan Swell Larry Powell St. Signature Printed Name

FILING FEE: \$25.00