

L119 00099599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

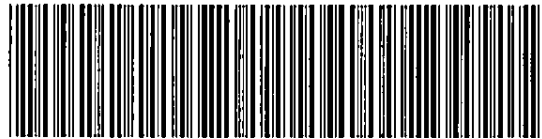
(Document Number)

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FILED
2024 APR 10 PM 2:52
STC
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HAMMOCK OAKS PROPERTIES, 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:

Sandra L. Test, Esq.
(Name of Person)

JOHN H. TEST, P.A.
(Firm/Company)

12150 SW 128 COURT, STE. 124
(Address)

MIAMI, FL 33186
(City/State and Zip Code)

For further information concerning this matter, please call:

Sandra L. Test at (305) 255-3924
(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:

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

HAMMOCK OAKS PROPERTIES, LLC

2. The Articles of Organization were filed on December 16, 2019 and assigned

document number L11000099599

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).

sale of all of LLC's property and sitribution of net proceeds to its member
pursuant to a vote of the members to dissolve

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. 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:

Christine E. Karelas
Signature

Christine E. Karelas
Printed Name

FILING FEE: \$25.00

FILED
2024 APR 10 PM 2:52
TALLAHASSEE, FLORIDA
CLERK OF THE COURT

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: HAMMOCK OAKS PROPERTIES, LLC

Document number of Limited Liability Company is: L11000099599

Date of dissolution was: date of filing dissolution articles

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

Name and address of claimant

Basis and amount of claim

statements or documentation in support thereof

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

Christine E. Karelas

5700 SW 72 Avenue

Miami, FL 33143

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.

Christine E. Karelas

Printed Name of the Person Filing

Christine E. Karelas

Signature of the Person Filing

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