Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : DEAN, MEAD, EGERTON, BLCODWORTH, CAPCUANO & BOZARTH, P.A.

Account Number : 076077001702 Phone

: (407)841-1200

Fax Number

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LLC DISSOLUTION OR WITHDRAWAL CITATION BOULEVARD INVESTMENTS, LLC

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12/17/2018

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ARTICLES OF DISSOLUTION

FOR

CITATION BOULEVARD INVESTMENTS, LLC

Pursuant to the provisions of Sections 605.0707 of the Florida Statutes, the undersigned Florida limited liability company hereby adopts the following Articles of Dissolution:

ARTICLE I - NAME OF COMPANY

The name of the company is Citation Boulevard Investments, LLC (hereinafter referred to as the "Company").

ARTICLE II - ORGANIZATION

The Articles of Organization of the Company were filed on September 20, 2012 and assigned document number L12000120792.

ARTICLE III - EFFECTIVE DATE OF DISSOLUTION

The effective date of the Company's dissolution is the date of filing these Articles of Dissolution with the Florida Department of State.

ARTICLE IV - OCCURRENCE OF DISSOLUTION

Pursuant to Section 605.0701(2) of the Florida Statutes and the Company's Operating Agreement, the dissolution was approved by written consent of all of the members of the Company.

ARTICLE V - WINDING UP

The person appointed by the members to wind up the Company's activities and affairs is:

Daryl M. Carter, Manager 3333 S. Orange Avenue, Suite 200 Orlando, FL 32806-8500

CHESTER C. FOSGATE COMPANY,

Member

Daryl M. Carter, Vice President

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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: Citation F	Boulevard Investments, LLC
Document number of Limited Liability Company is	:L12000120792
Date of dissolution was: Upon filing	<u> </u>
Description of information that must be included in	a written claim:
Name of Claimant:	18
Address of Claimant:	
Amount of Claim:	SS
Basis of Claim (attach additional sheets if neces	Color of the color
Mailing address where claims can be sent: (Claims of Daryl M. Carter	cannot be sent to the Division of Corporations)
3333 S. Orange Avenue, Suite 200	
Orlando, FL 32806-8500	
claim is commenced within 4 years after the filing o	impany will be barred unless a proceeding to enforce the
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