

12/14/2018

413000110874  
Division of Corporations  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H18000355086 3))



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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : LAW OFFICES OF ANNA KRIMSHEIN, PLC  
Account Number : I20130000047  
Phone : (305)932-4100  
Fax Number : (305)397-2575

STATE OF FLORIDA  
TALLAHASSEE, FL

2018 DEC 18 AM 8:59

FILED

LLC DISSOLUTION OR WITHDRAWAL  
FARMERS LAND FOOD, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

2018 DEC 19 PM 2:35

Electronic Filing Menu

Corporate Filing Menu

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DEC 19  
S. PRATHER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles of Dissolution

**DOCUMENT NUMBER:** L13000060874

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anna Krimshstein  
(Name of Contact Person)

Law Offices of Anna Krimshstein, PLC  
(Firm/Company)

2203 NE 203rd Terrace  
(Address)

Miami, FL 33180  
(City/State and Zip Code)

For further information concerning this matter, please call:

Anna Krimshstein at ( 305-932-4100 )  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Fax Audit Number: H18000353086 3

**ARTICLES OF DISSOLUTION**

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:  
FARMERS LAND FOOD, LLC

SECOND: The document number of the corporation (if known): L13000060874

THIRD: The date dissolution was authorized: December 13, 2018

Effective date of dissolution if applicable: \_\_\_\_\_  
(no more than 90 days after dissolution file date)

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.

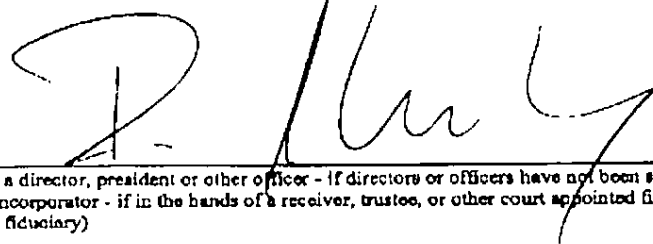
FOURTH: Adoption of Dissolution (CHECK ONE)

- Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_ (voting group)

Signature:   
(By a director, president or other officer - If directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Ralph Schulz  
\_\_\_\_\_  
(Typed or printed name of person signing)

Manager  
\_\_\_\_\_  
(Title of person signing)

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Fax Audit Number: H18000355086 3

**Filing Fee: \$35**  
**Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: FARMERS LAND FOOD, LLC

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

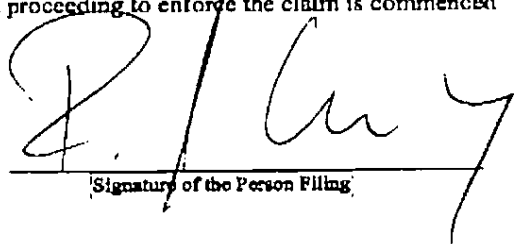
Description of information that must be included in a claim:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  
900 BISCAYNE BLVD, SUITE 705, MIAMI, FL 33132  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FL  
STATE

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Ralph Schulz  
Printed Name of the Person Filing

  
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00