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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 Phone : (407)841-1200 : (407)423-1831 Fax Number

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LLC DISSOLUTION OR WITHDRAWAL SWEET PINE, LLC

Certificate of Status	0
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Page Count	02
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JUL 19 2022 T. LEMIEUX Fax: 14078411200

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabili SWEET PINE, LLC	ty company is		 		·	
2.	The Articles of Organization	were filed on April 3	60, 2013	and assig	gned		
	document numberL130000	63728	<u> </u>				
3.	(effective Note: If the date inserted in the	the dissolution if not effective on the date of filing: The date cannot be prior to or more than 90 days later than date document is received for filing)					
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).						
	Consent of the Member.						
5.	If there are no members, entactivities and affairs:	er the name and addre Lucas D. Haber	ss of the person appoi	nted to wind up	the comp	pany's	
		6 Lionspaw VII Nobles					
		Daytona Beach, FL 32124					
				<u> </u>	2022		
6. at	Signature of an authorized pove to wind up the company	person or if there are no 's activities and affairs	o members, the signat s:	ure of the perso	9	ed and listed	
			Lucas D. Haber		-15		
	Signature			rinted Names	6: 48		
FILING FEE: \$25.00 🙉 🗪							

From: Leslie Perryman Fax: 14078411200 To: Fax: (850) 617-6383 Page: 3 of 3 07/19/2022 1:27 F

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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: SWEET PINE, LLC	
Document number of Limited Liability Company is:	000063728
Date of dissolution was: Upon filing	
Description of information that must be included in a writt	en claim:
Name of Claimant:	
Address of Claimant:	
Amount of Claim:	
Basis of Claim:	
Mailing address where claims can be sent: (Claims cannot 6 Lionspaw VII Nobles	be sent to the Division of Corporations)
Daytona Beach, FL 32124	
A claim against the above named limited liability compan claim is commenced within 4 years after the filing of this.	
Lucas D. Haber	
Printed Name of the Person Filing	Egnature of the Person Filing

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