

L13000100886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

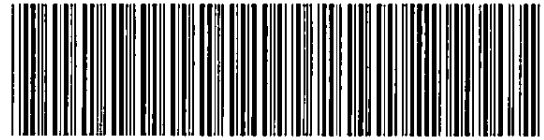
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/10/24--01007--020 **25.00



CLERK OF STATE
TALLAHASSEE, FL

2024 DEC 10 PM 3:40

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tuscumbia Land, 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:

Christopher Koenig

(Name of Person)

Greenway Automotive Management, LLC

(Firm/Company)

9001 E Colonial Dr, Attn: Corporate - 2nd Floor

(Address)

Orlando, FL 32817-4173

(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher Koenig

407

203 0119

at ()

(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



STATE
TALLAHASSEE, FL

2024 DEC 10 PM 3:41

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
Tuscumbia Land, LLC
2. The Articles of Organization were filed on July 16, 2013 and assigned
document number L13000100886
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).
The company opted for voluntary dissolution due to the conclusion of business operations.
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:

Signed by:

Chris Allen

DE5E7D191B524E8

Signature

Christopher Allen, CFO

Printed Name

FILING FEE: \$25.00

024 DEC 10 PM 3:41
DEPT OF STATE
TALLAHASSEE, FL

FILED

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: Tuscumbia Land, LLC

Document number of Limited Liability Company is: L13000100886

Date of dissolution was: Date of filing per the Articles of Dissolution.

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

The identity of the claimant and the detailed description of the claims, including the time, place,
related personnel and any and all other relevant information.

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

9001 E Colonial Dr

Attn: Corporate - 2nd Floor

Orlando, FL

32817-4176

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.

Christopher Allen, CFO

Printed Name of the Person Filing

Signed by:

Chris Allen

Signature of the Person Filing

2024 DEC 10 PM 3:41
OFFICE OF THE
CLERK OF THE
STATE
TALLAHASSEE, FL

FILED

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