Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : GUNSTER, YOAKLEY & STEWART, P.A.

Account Number: 076117000420

Phone Fax Number : (561)650-0728 : (561)671-2527

LLC DISSOLUTION OR WITHDRAWAL DRWD, LLC

Certificate of Status	0
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ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY DRWD, LLC

Pursuant to Sections 605.0701 and 605.0707 of the Florida Revised Limited Liability Company Act (the "Act"), the undersigned hereby submits these Articles of Dissolution to the Florida Department of State:

- 1. The name of the limited liability company is DRWD, LLC (the "Company").
- 2. The Articles of Organization were filed with the Florida Department of State on December 30, 2013 and assigned Document Number L13000177842.
- 3. Pursuant to Section 605.0701 of the Act, dissolution was authorized by Written Consent of all of the members of the Company, dated as of August 22, 2015.
- 4. All debts, obligations and liabilities of the Company have been paid or discharged in accordance with the Act.
- 5. All property and assets of the Company have been distributed to the members of the Company in accordance with the Act.
 - 6. There are no suits pending against the Company in any court.

IN WITNESS WHEREOF, the undersigned hereby executes these Articles of Dissolution as of the 22nd day of August, 2015.

MANAGER:

DRWD, LLC

Name JNeffrey Nouhan

Title: Manager

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NOTICE OF DISSOLUTION FOR FLORIDA LIMITED LIABILITY COMPANY

This Notice of Limited Liability Company Dissolution ("Notice") is submitted by the dissolving limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in Section 605.0712, Florida Statutes.

Name of Limited Liability Company:

DRWD, LLC (the "Company").

Document Number of Limited Liability Company: L13000177842.

Date of Dissolution: The date the Articles of Dissolution of the Company are filed with the Department of State.

Description of Information that must be included in a written claim: The information that must be included in a claim submitted pursuant to this Notice shall be as follows:

- (a) Name, address and telephone number of claimant.
- (b) Amount of claim, including, if applicable, principal, interest, penalties or other fees or charges.
- (c) A statement of the basis for the claim.
- (d) A copy of any and all writings evidencing the claim or upon which the claim is based.
- (e) A statement of whether or not the claimant has other claims against the company or its managers, officers, agents or representatives, in their capacities as such, and, if the claimant states that the claimant has other claims, a statement of whether or not such other claims are being submitted pursuant to this Notice, or if such other claims will not be so submitted, a statement as to the reason why.

Mailing address where claims can be sent: A claim submitted pursuant to this Notice shall be mailed by certified or registered mail, return receipt requested, postage prepaid, to the following party: J. Jeffrey Nouhan, 4175 NW 24th Terrace, Boca Raton, Florida 33431.

A claim against the Company will be barred unless a proceeding to enforce the claim is commenced within four years after the filing of this notice.

MANAGER:

DRWD, LLC

Title: Manager

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