# 114000050933

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	: #)
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Certified Copies	_ Certificates	of Status
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### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: DAR Enterpri	ses of Hernand			
(Name of Limited	Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted	d for filing.			
Please return all correspondence concerning this matter to the	e following:			
Don FIAZIET	of Person)  Lise OF Harmino LLC.  Company)			
(Name	of Person)			
D. C. ENTER	lise of Hoenmon LLC.			
(Firm/Company)				
521 Colonial Dr (Address)				
(Address)				
Brookswille FC 34601 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Richard Gervais	at ( 352 ) 434 - 1482 (Area Code & Daytime Telephone Number)			
(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:	Street Address:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
1 alialiassee, FL 32314	2712 IV. MIDITUE SUEEL, SUITE 610			

Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  18 R Enterprises of Hernando, LLC	<b>-</b>
2.	The Articles of Organization were filed on and assigned	
	document number <u>L1400050933</u>	
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 listed as the document's effective date on the Department of State's records.	be
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).  Sold Company of Nov. 2021.	ı
	No longs doing business.	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's	
	activities and affairs:  Don Frazier	
	521 Colonial Dr	
	Brooksville F1 34601	
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listove to wind up the company's activities and affairs:	sted
	Signature Don Frazier Printed Name	

**FILING FEE: \$25.00** 

### 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: D&R Enterprises o. 5 H	ernado, LL
Document number of Limited Liability Company is: L140000 50933	·
Date of dissolution was: 4/1/32.	
Description of information that must be included in a written claim:	9099 L.
Sold company on Nov. 2021.	<del></del>
	· 
	20
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  **Brooksville** H. 3401	
A claim against the above named limited liability company will be barred unless a proceeding to enclaim is commenced within 4 years after the filing of this notice.	nforce 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