# 14000089092

(Req	uestor's Name)			
(Addı	ress)			
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(City/	/State/Zip/Phone	e #)		
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June 8, 2015

SHAUN CARROLL 9145 SWEET TREE TRAIL JACKSONVILLE, FL 32256

SUBJECT: GATOR GOLF USA LLC

Ref. Number: L14000089092

We have received your document for GATOR GOLF USA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 015A000 JUL 23 P 2: LAHASSEE, FLOR

www.sunbiz.org

TO:

Registration Section
Division of Corporations

SUBJECT:

# **GATOR GOLF USA 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:

SHAUN CARROLL		
(Name of Person)		
(Firm/Company)		
9145 SWEET TREE TRAIL		
(Address)		
JACKSONVILLE, FL 32256		
(City/State and Zin Code)		

For further information concerning this matter, please call:

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260-1737

(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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabil GATOR GOLF USA LLC	ity company is		· · ·		· ·
2.	The Articles of Organizatio	n were filed on		and assign	eđ	
	document number L140000	39092				
3.	Note: If the date inserted in t	he dissolution if not effective date cannot be prior to or more than his block does not meet the applitive date on the Department of S	icable statutory filing re	07/23/2015 ocument is recognirements,	i ceived fo this dat	or filing) te will not be
4.	A description of occurrence 605.0707, Florida Statutes, (	that resulted in the limited licopy 605.0707 on back cover	ability company's dis	solution pu	ırsuant	to section
	SHAUN CARROLL		·			
5.		ter the name and address of the	ne person appointed to	o wind up ti	he con	ıpany's
	activities and affairs:	SHAUN CARROLL		<u> </u>	201	<del></del>
		9145 SWEET TRAIL TRAIL		CRE II		
		JACKSONVILLE, FL 32256		RY OF S	23	
				.OR	?	
6. lis	Signature of an authorized pated above to wind up the cor	person or if there are no memb npany's activities and affairs:	pers, the signature of		appoin	ited and
	o. O.M					
	Mu Glell J	SH	AUN CARROLL			
	Signature		Printed	Name		

**FILING FEE: \$25.00**