

L14000119064

(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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02/11/15--01009--011 **25.00

FILED
15 MAR 24 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAR 25 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAWN COMMANDER OF CENTRAL FLORIDA LLC
(Name of Limited Liability Company) L14000119064

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TIM GARRETSON
(Name of Person)

LAWN COMMANDER OF CENTRAL FLORIDA LLC
(Firm/Company)

950 WHITMORE RD. APT. 101
(Address)

DETROIT, MI 48203
(City/State and Zip Code)

For further information concerning this matter, please call:

TIM GARRETSON at (719) 208-9400
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 18, 2015

TIM GARRETSON
950 WHITMORE RD APT 101
DETROIT, MI 48203

SUBJECT: LAWN COMMANDER OF CENTRAL FLORIDA LLC
Ref. Number: L14000119064

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

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

Tim Burch
Regulatory Specialist II

Letter Number: 515A00003434



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 6, 2015

TIM GARRETSON
950 WHITEMORE RD APT 101
DETROIT, MI 48203

SUBJECT: LAWN COMMANDER OF CENTRAL FLORIDA LLC
Ref. Number: L14000119064

15 MAR 24 AM 10:00
RECEIVED
DIVISION OF CORPORATIONS
STATE OF FLORIDA

We have received your document for LAWN COMMANDER OF CENTRAL FLORIDA 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 limited liability company must complete and submit a Voluntary Dissolution along with the attached Notice of Dissolution in order to dissolve a Florida limited liability company on our records. The fee to file both the Voluntary Dissolution and Notice of Dissolution is \$25.

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.

Tim Burch
Regulatory Specialist II

Letter Number: 115A00004697

NOTICE: The Florida Department of State, Division of Corporations, has received your document for LAWN COMMANDER OF CENTRAL FLORIDA LLC. The document is being returned to you because it does not contain the required information. The document is being returned to you with the following corrections: The document must contain a Voluntary Dissolution and a Notice of Dissolution. The fee to file both the Voluntary Dissolution and Notice of Dissolution is \$25.00. The document must be filed within 60 days of the date of this letter. If you have any questions concerning the filing of your document, please call (850) 245-6051.

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

LAWN COMMANDER OF CENTRAL FLORIDA LLC

2. The Articles of Organization were filed on 7/29/2014 and assigned

document number L14000119064

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)

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).

RE-LOCATED OUT OF STATE. JOB OFFER

OUT OF THE STATE OF FLORIDA.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: N/A

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:

Tim Garrison
Signature

TIM GARRISON
Printed Name

FILING FEE: \$25.00

15 MAR 26 PM 4:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

Notice of Limited Liability Company Dissolution

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: LAWN COMMANDER OF CENTRAL FLORIDA LLC

Document number of Limited Liability Company is: L 14000119064

Date of dissolution was: 2/1/2015

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

RE-LOCATED OUT OF STATE. THE \$25⁰⁰
WAS ALREADY PAID, CHECK # 1017,
CASHED ON 2/12/15. THANK YOU!

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

300 FORDHAM DRIVE
DAYTONA BEACH, FL 32118

FILED
15 MAR 26 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

TIMOTHY GARRETSON

Printed Name of the Person Filing

Tim Case

Signature of the Person Filing