

12/7/2016

2016-12-07 09:10:08 CST

Burr and Forman from Owners, Mary

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BURR & FORMAN LLP
Account Number : I19990000278
Phone : (407)540-6600
Fax Number : (407)540-6601

LLC DISSOLUTION OR WITHDRAWAL
FERIATUS REALTY LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2016 DEC -7 AM 10:52
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TALLAHASSEE, FLORIDA

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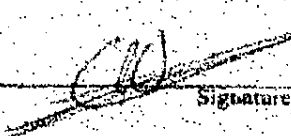
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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

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TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Feratus Realty LLC
2. The Articles of Organization were filed on September 11, 2014 and assigned
document number L14000142258
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).
Consent of the sole member
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:


Signature

Michael A Van Schwick
Printed Name

FILING FEE: \$25.00

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Notice of Limited Liability Company Dissolution

This notice is submitted by Ferianus Realty LLC, a Florida limited liability company, for resolution of payment of unknown claims against this corporation as provided in s. 605.0712, Florida Statutes.

Name of Limited Liability Company: Ferianus Realty LLC.

Document number of Limited Liability Company is: L14000142258.

Date of dissolution will be the date the dissolution is filed with Department of State.

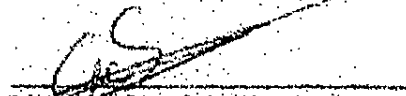
Description of information that must be included in a claim:

1. The name and address of the claimant.
2. The date the claim arose.
3. The nature of the claim.
4. The amount of claim.
5. Copies of any and all documents or instruments evidencing or memorializing claim.
6. The claimant(s)' United States social security number, federal identification number or appropriate taxpayer identification number.
7. Each claim must be submitted separately.

Mailing address where claims can be sent:

Michiel van Schaick
Noordammerweg 68A
1187 ZT Amsterdam
The Netherlands

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within four years after the filing of this notice.


Michiel A. Van Schaick

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