

L15000072977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

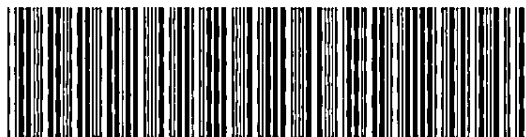
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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18 DEC -5 AM 8 07

12/05/18--01015--003 **50.00

18 DEC -5 AM 11:33
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

O SIMMONS
DEC 05 2018

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 12/5/2018

****WALK IN****

ENTITY NAME ARBOR RIDGE ENCLAVE, LLC

DOCUMENT NUMBER L15000072977

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$25.00

CHECK # 5506

Please call Tina at the above number for any issues or concerns. Thank you so much!

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

1. The name of a limited liability company is

Arbor Ridge Enclave, LLC

2. The Articles of Organization were filed on 4/24/2015 and assigned

document number L15000072977

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).

The entity is no longer needed.

5. If there are no members, enter the name and address of the person appointed to wind up the company's

activities and affairs:

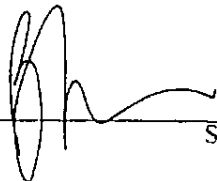
Blake Sachs

c/o Sachs Investing Co.

155 East 55th St. Suite 5F

New York, NY 10022

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

Blake Sachs

Printed Name

FILING FEE: \$25.00