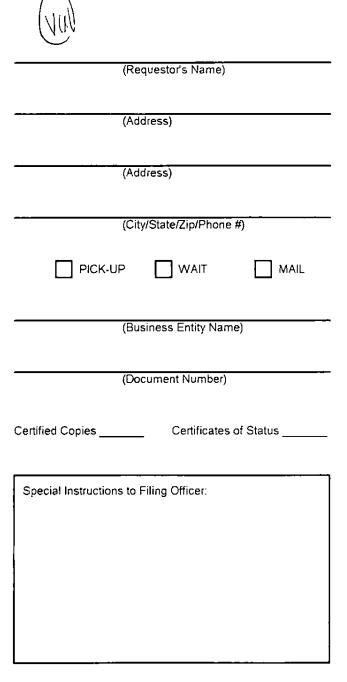
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. COVER LETTER

	istration Section ision of Corporations	, ORIGINAL	
cub uzer.	HUDSON'S NURSERY LLC		
SUBJECT:	(Name of Limit	ed Liability Company)	
The enclosed	Articles of Dissolution and fee(s) are submit	ted for filing.	
Please return	all correspondence concerning this matter to	the following:	
	Paul Hydson		
(Name of Person)			
	Hudson's Nursery		
(Firm/Company)			
	11916 SW 8th Avenue		
(Address)			
	Gainesville, Florida 32607		
	(City/Sta	ite and Zip Code)	
For further in	nformation concerning this matter, please call:	:	
G. Ray Cauthen Jr CPA		352 338-9030	
	(Name of Person)	at () (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)	
Ma	iling Address:	Street Address:	

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Hudson's Nursery LLC
2.	The Articles of Organization were filed on May 29, 2015 and assigned
	document number <u>L15000094143</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 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).
	DUE TO HEALTH REASONS AND OWNERS AGE THE BUSINESS MUST CEASE AS OF THE END
	OF CALENDAR YEAR 2023.
	English Sign Fig. 5
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. at	Signature of an authorized person or if there are no members, the signature of the person appointed and listed pove to wind up the company's activities and affairs:
	Audley P. Hudson Stanature Dudley P. Hudson Printed Name
	Signature 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: Hudson's Nursery L	LC
Document number of Limited Liability Company is:	5000094143
Date of dissolution was:	
Description of information that must be included in a w	ritten elaim:
Date, description of items regarding claim, amount alleged di	ac
Mailing address where claims can be sent: (Claims can	not be sent to the Division of Corporations)
11916 SW 8th Avenue	
Gainesville Florida 32607	
A claim against the above named limited liability comp claim is commenced within 4 years after the filing of th	any will be barred unless a proceeding to enforce the is notice.
Dudicy P. Hudson	Dudly P. Hudson Signature of the Person Filing
Printed Name of the Person Filing	Signature of the Person Fitting

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00