

L15000 121908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

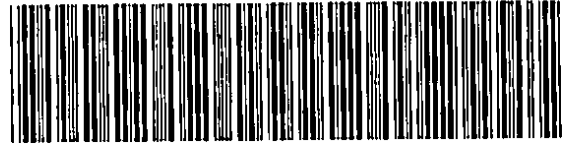
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/22/19--01030--021 **25.00

FILED
2019 JAN 22 AM 9:44
TALLAHASSEE FLORIDA

D. BRUCE
JAN 28 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **LYSANDER SPOONER, 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:

Andrew C. Fentiman

(Name of Person)

(Firm/Company)

5051 PELICAN COLONY BOULEVARD, APT. 603

(Address)

BONITA SPRINGS, FL 34134

(City/State and Zip Code)

For further information concerning this matter, please call:

Andrew C. Fentiman

(Name of Person)

at **239 405-3455**

(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

FILED
2019 JAN 22 AM 9:44
TALLAHASSEE, FL 32301
DIVISION OF CORPORATIONS

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

1. The name of a limited liability company is

LYSANDER SPOONER, LLC

2. The Articles of Organization were filed on 07/16/2015 and assigned

document number L15000121908

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 members voted to voluntarily dissolve the limited liability company and cease doing business.

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

Andrew C. Fentiman

Printed Name

FILING FEE: \$25.00

FILED
JAN 22 AM 9:44
TALLAHASSEE, FLORIDA

**RESOLUTIONS OF MEMBERS
OF
LYSANDER SPOONER, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

We hereby certify that we are the sole Members of **LYSANDER SPOONER, LLC**, a Florida limited liability company (herein the "Company"), and that the following is a true, accurate and compared transcript of the resolutions contained in the minute book of the Company duly adopted at a meeting of the Member thereof duly held on the ___ day of January, 2019, at which meeting a quorum authorized to transact the business hereinafter described was present and acting throughout, and that the proceedings of said meeting were in accordance with the Articles of Organization and Operating Agreement of the Company, and that said resolutions have not been amended or revoked and are in full force and effect:

UNANIMOUSLY RESOLVED, that:

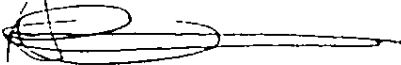
- I. The Company shall be dissolved;
- II. Andrew C. Fentiman, as an Authorized Member of the Company, be and hereby is authorized, empowered, and directed on behalf of the Company:

(1) To retain the firm of Woods, Weidenmiller, Michetti, & Rudnick, PL ("Closing Agent") to assist with the dissolution and draft a warranty deed conveying the property located at 3610 Lansing Loop, Unit 203, Estero, Florida 33928 (the "Residence"), such Residence being the sole asset of the Company;

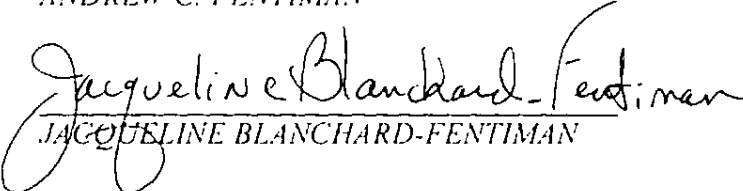
(2) To perform any other duties necessary to dissolve and "wind down" the Company, including, but not limited to filing all paperwork necessary to dissolve the Company with the Secretary of The State of Florida.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Company as of the 15th day of *January*, 2019.

MEMBERS:



ANDREW C. FENTIMAN



JACQUELINE BLANCHARD-FENTIMAN

FILED
2019 JAN 22 AM 9:19
CLERK OF DISTRICT COURT
FLORIDA

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: LYSANDER SPOONER, LLC

Document number of Limited Liability Company is: L15000121908

Date of dissolution was: The Date of filing Articles of Dissolution.

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

Basis for claim and underlying paperwork (i.e. contract, bill, etc.)

Name of the claimant

Address of the claimant

Name of payee to receive payment

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

5051 PELICAN COLONY BOULEVARD

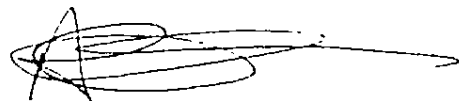
UNIT 603

BONITA SPRINGS, FL 34134

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.

Andrew C. Fentiman

Printed Name of the Person Filing



Signature of the Person Filing

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

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2019 JAN 22 AM 9:44
TALLAHASSEE FLORIDA