

4500017824

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

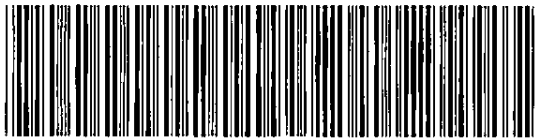
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

Morristown Land, LLC

**SUBJECT:** \_\_\_\_\_  
(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:

Christopher Koenig

\_\_\_\_\_  
(Name of Person)

Greenway Automotive Management, LLC

\_\_\_\_\_  
(Firm/Company)

9001 E Colonial Dr, Attn: Corporate - 2nd Floor

\_\_\_\_\_  
(Address)

Orlando, FL 32817-4173

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher Koenig

407

203 0119

at ( )

\_\_\_\_\_  
(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 Address:**

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

SEAL OF THE STATE  
TALLAHASSEE, FL

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

1. The name of a limited liability company is  
Morristown Land, LLC

October 20, 2015

2. The Articles of Organization were filed on \_\_\_\_\_ and assigned  
document number LI 5000178424

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 company opted for voluntary dissolution due to the conclusion of business operations.

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:

Signed by:

*Chris Allen*

DF5F7D191B524E8

Signature

Christopher Allen, CFO

Printed Name

**FILING FEE: \$25.00**

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DEC 10 PM 3:41  
DEPT. OF STATE  
TALLAHASSEE, FL

## 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: Morristown Land, LLC

Document number of Limited Liability Company is: L15000178424

Date of dissolution was: Date of filing per the Articles of Dissolution.

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

The identity of the claimant and the detailed description of the claims, including the time, place.

related personnel and any and all other relevant information.

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

9001 E Colonial Dr

Attn: Corporate - 2nd Floor

Orlando, FL

32817-4176

A claim against the above named limited liability company will be barred unless a proceeding to enforce claim is commenced within 4 years after the filing of this notice.

Christopher Allen, CFO

Printed Name of the Person Filing

Signed by:

Chris Allen

Signature of the Person Filing



SECRET  
STATE  
FILING  
OFFICE, FL

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