16000104605

(Requestor's Name)				
(Address)				
(Address)				
(1001000)				
(A) (A) (B) (A)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Certificates of Status				
Special Instructions to Filing Officer:				

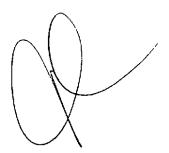
Office Use Only



600420518096

12/21/23--01029--003 **25.00





December 20, 2023

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

Subject: Filing of Articles of Dissolution

Dear Secretary Byrd,

I am writing to formally file the Articles of Dissolution for the following domestic entities. I have enclosed all necessary documents and completed forms in accordance with the guidelines provided.

Greenway Spartanburg Sun Loan Management, LLC Greenway Norristown Well Loan Management, LLC Greenway Loan Management, LLC Greenway Jacksonville Sun Loan Management, LLC

If any additional information is required, please do not hesitate to contact me at the following address:

520 N. Semoran Blvd, Suite 100, Orlando FL 32817 legal@greenway.com

Thank you for your time and consideration.

Sincerely,

--- Docusigned by:
(lin's Allen

COVER LETTER

то:		tion Section of Corporations				
SUBJ	ECT:		un Loan Management, LLC Liability Company)			
		cles of Dissolution and fee(s) are submitted correspondence concerning this matter to the	· ·			
	Christopher Allen, CFO					
		(Name	of Person)			
Greenway Automotive Management, LLC						
	(Firm/Company)					
		500 N O	DI 1 0 11 100			
520 N Semoran Blvd, Suite 100 (Address)						
		·	,			
Orlando, FL 32817						
		(City/State	and Zip Code)			
For further information concerning this matter, please call:						
	<u>Chri</u>	stopher Koenig, General Counse (Name of Person)	at (407) 203-0119 (Area Code & Daytime Telephone Number)			
Enclose	ed is a check	for the following amount:				
		ling Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
	Registra Divisio P.O. Bo	Address: ation Section n of Corporations ox 6327 ssee, FL 32314	Street Address: 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	
	Greenway Spart	anburg Sun Loan Management, LLC	
2.	The Articles of Organization	vere filed on June 9, 2016 and assigned	
	document numberL1600	0104605	
3.	(effective da Note: If the date inserted in this	dissolution if not effective on the date of filing: the cannot be prior to or more than 90 days later than date document is received for filing) block does not meet the applicable statutory filing requirements, this date will not be the date on the Department of State's records.	
4.	A description of occurrence the 605.0707, Florida Statutes, (co	at resulted in the limited liability company's dissolution pursuant to section by 605.0707 on back cover letter).	
	The company opted for v	pluntary dissolution due to the conclusion of its business operation	าร
5.	If there are no members, enter activities and affairs:	the name and address of the person appointed to wind up the company's 3	-
		7.110:38	
6. ab	Signature of an authorized per ove to wind up the company's	son or if there are no members, the signature of the person appointed and listed activities and affairs:	l
	(h)	Christopher Allen, CFO	
	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: GREENWAY SPARTANBURG SUN LOAF	<u>I MANAGEMENT, LLI</u>
Document number of Limited Liability Company is: <u>L16000104605</u>	<u>-</u>
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, in	cluding the time
place, related personnel and any and all other relavant information.	20/3 DED
	22
	:110:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corpor	ద్ద
520 N Semoran Blvd, Suite 100	
Orlando, FL 32817	
Attn: Christopher Allen, CFO	
A claim against the above named limited liability company will be barred unless a proceedi claim is commenced within 4 years after the filing of this notice.	ng to enforce the
Christopher Allen, CFO	1
Printed Name of the Person Filing Signature of the Person	ı Filing

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