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C GOLDEN APR - 6 2020

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: COLVEN 1AWN	care LLC	
(Name of Limited Liability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted	d for filing.	
Please return all correspondence concerning this matter to the	e following:	
JIII COLV	(()	
COLVIN LAWN CAVE LLC (Firm/Company)		
15400 Sw 29th St. (Address) Ocala, Fl 34481 (City/State and Zip Code)		
(Address)		
Ocala, Fl 34481		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
UIII COLVEN (Name of Person)	at (352) 207-9507	
(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:	Street 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



2020 H/R 30 AMH: 12

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2020

JILL COLVIN 15400 SW 29TH STREET OCALA, FL 34481

SUBJECT: COLVIN LAWN CARE, LLC

Ref. Number: L16000136583

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A Statement of Termination may be filed after the limited liability company has completed winding up and after a voluntary dissolution has been filed with this office. See section 605.0709(7), Florida Statutes for reference.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 520A00005966

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	FOR 25
	A LIMITED LIABILITY COMPANY
1. The name of a limited li	ability company is Colven lawn Care, Lice Manager 17/20/2016
The Articles of Organiza	ation were filed on $\frac{7/30/3016}{}$ and assigned
document number	16000136583
Note: If the date inserted	nte the dissolution if not effective on the date of filing: 10/1/36/6 etive date cannot be prior to or more than 90 days later than date document is received for filing). In this block does not meet the applicable statutory filing requirements, this date will not be effective date on the Department of State's records.
4. A description of occurre 605,0707, Florida Statute	ence that resulted in the limited liability company's dissolution pursuant to section es, (copy 605.0707 on back cover letter).
	enter the name and address of the person appointed to wind up the company's
activities and affairs:	, enter the name and address of the person appointed to while up the company's
	JIII Colvin
	JIII Colvin 15400 SW 29th St
	Ocala 171 34481
6. Signature of an authoriz above to wind up the comp	ted person or if there are no members, the signature of the person appointed and listed any's activities and affairs:
Molor	JIII Colven
Signatur	e Printed Name

FILING FEE: \$25.00