

LI6000176 L50

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

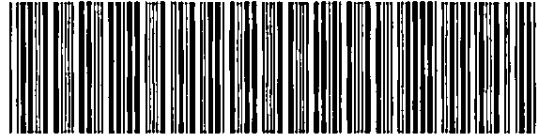
(Document Number)

Certified Copies ☒

Certificates of Status ☒

Special Instructions to Filing Officer:

Office Use Only



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01/11/18--01010--021 **55.00

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JAN 22 2019

FILED

19 JAN 11 PM 3:23

CLERK OF COURT

Missed
notice

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 3639 OLD HAMMOCK, 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:

TIMOTHY CARNAGO

(Name of Person)

3639 OLD HAMMOCK LLC

(Firm/Company)

PO BOX 214040

(Address)

DAYTONA BEACH, FL 32121-4040

(City/State and Zip Code)

For further information concerning this matter, please call:

TIMOTHY CARNAGO

(Name of Person)

at (386) 747-7300

(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

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

1. The name of a limited liability company is
3639 OLD HAMMOCK, LLC

2. The Articles of Organization were filed on 09-21-2016 and assigned
document number L16000176650

3. The delayed effective date the dissolution if not effective on the date of filing: 12-31-2018
(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).

SALE OF PROPERTY

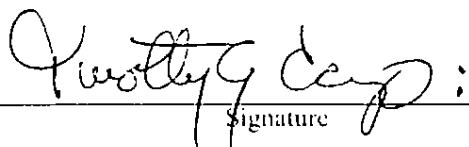
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

TIMOTHY CARNAGO

PO BOX 214040

DAYTONA BEACH, FL 32121-4040

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

TIMOTHY CARNAGO

Printed Name

FILING FEE: \$25.00

19 JAN 11 PM 3:03

FILED

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: 3639 OLD HAMMOCK, LLC

Document number of Limited Liability Company is: L16000176650

Date of dissolution was: 12/31/2018

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

DATE, PLACE

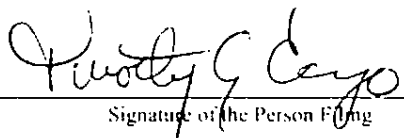
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

PO BOX 214040

DAYTONA BEACH, FL 32121-4040

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.

TIMOTHY CARNAGO
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