

From: Leslie Perryman
9/15/21, 8:58 AM

Fax: 14078411200

To:

Fax: (850) 617-6883

Page 1 of 3

9/15/2021 9:10 AM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000341231 3)))

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702

Phone : (407)841-1200

Fax Number : (407)423-1831

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2021 SEP 15 AM 10:17

**LLC DISSOLUTION OR WITHDRAWAL
ALLIGATOR REEF PROPERTIES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

SEP 16 2021

A. LUNT

2021 SEP 15 AM 9:54

ALLIGATOR REEF PROPERTIES, LLC
ALLAHAM, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

(((H21000341231 3)))

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

1. The name of a limited liability company is

Alligator Reef Properties, LLC

2. The Articles of Organization were filed on December 29, 2016 and assigned

document number L16000233731

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).

Consent of the sole Member.

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

Elva Jane Wherry

2195 Wherry Road

Mims, FL 32754

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:

Elva Jane Wherry
Signature

Elva Jane Wherry

Printed Name

FILING FEE: \$25.00

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DIVISION OF CORPORATION
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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: Alligator Reef Properties, LLC

Document number of Limited Liability Company is: L16000233731

Date of dissolution was: Upon filing

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

Name of Claimant: _____

Address of Claimant: _____

Amount of Claim: _____

Basis of Claim: _____

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

Elva Jane Wherry

2195 Wherry Road

Mims, FL 32754

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.

Elva Jane Wherry

Printed Name of the Person Filing

Elva Jane Wherry
Signature of the Person Filing

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

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