

L17000040185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

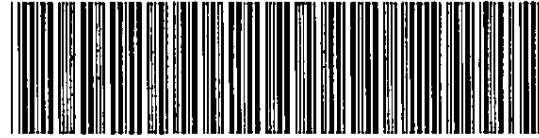
(Business Entity Name)

(Document Number)

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

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Office Use Only



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04/20/18--01027--023 \*\*25.00

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18 MAY 18 PM 2:22  
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MAY 18 2018  
MAY 18 2018

MAY 18 2018  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 25, 2018

SANDRA ASHCRAFT  
158 SENECA DR  
MARIETTA, OH 45750

SUBJECT: FLORIDA ASHCRAFT LLC  
Ref. Number: L17000040185

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

Please list description of information that must be included in a written claim.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist III

Letter Number: 518A00008491

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18 MAY 18 PM 1:17  
DIVISION OF STATE  
CORPORATIONS  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **FLORIDA ASHCRAFT 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:

**SANDRA ASHCRAFT**

(Name of Person)

(Firm/Company)

**158 SENECA DRIVE**

(Address)

**MARIETTA, OH 45750**

(City/State and Zip Code)

For further information concerning this matter, please call:

**SANDRA ASHCRAFT**

(Name of Person)

at ( **740** ) **236-0618**

(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

FLORIDA ASHCRAFT LLC

2. The Articles of Organization were filed on 02/20/2017 and assigned

document number L17000040185

3. The delayed effective date the dissolution is not effective on the date of filing: March 30, 2017  
(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).

Real Property has NOT been + will NOT be transferred to  
Florida Ashcraft LLC

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

Sandra H Ashcraft

26430 STATE ROUTE 7

MARIETTA, OH 45750

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:

Sandra Ashcraft  
Signature

SANDRA ASHCRAFT

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: FLORIDA ASHCRAFT LLC

Document number of Limited Liability Company is: L17000040185

Date of dissolution was: MARCH 31, 2018

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

Date, description, amount, and contact  
information of the claim.

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

158 SENECA DRIVE  
MARIETTA, OH 45750

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.

SANRDA ASHCRAFT

Printed Name of the Person Filing

Sandra Ashcraft

Signature of the Person Filing

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