

L17 000 203 470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

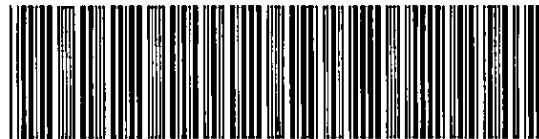
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300342434173

03/23/20--01012--010 **35.00

R WHITE

APR 06 2020

2020/11/23 PM 2:05

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T.P. O'Brien & Sons 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:

Thomas Peter O'Brien
(Name of Person)

TPO'Brien & Sons LLC
(Firm/Company)

1005 Bent Creek Dr (former) 825 Buckeye Lane.
(Address)

St Johns FL 32259
(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas Peter O'Brien at (914) 673 1441
(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:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: T.P. O'Brien & Sons LLC

Document number of Limited Liability Company is: L 17000 203 3470

Date of dissolution was: 8 / 1 / 19 FEI 82-3058749

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

LLC setup for townhome. Townhome rental
Sold.

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

1005 Bent Creek Dr
St Johns FL 32259

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.

Thomas Peter O'Brien
Printed Name of the Person Filing

[Signature]
Signature of the Person Filing

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

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

2020.11.23 PM 2:05

1. The name of a limited liability company is

TP O'Brien & Sons LLC

2. The Articles of Organization were filed on 10/2/17 and assigned

L 1700 2033470
document number L 17000 206173

3. The delayed effective date the dissolution if not effective on the date of filing: 1/15/20
(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).

LLC was set up for turnhome rental property.
Property was sold in 2019. Decided to
dissolve after sale.

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

Thomas Peter O'Brien
1005 Bent Creek Dr.
SLIDERS FC 32257

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

Thomas Peter O'Brien
Printed Name

FILING FEE: \$25.00