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(((H23000074978 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

> LLC DISSOLUTION OR WITHDRAWAL EAGLE DRIVE PROPERTIES, LLC

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Help

(((H23000074978 3))) ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liahi EAGLE DRIVE PROPERTIE	• • •	
2.	The Articles of Organizatio	n were filed on February 7, 2018	and assigned
	document number 1.180000	33870	
3.	(effective Note: If the date inserted in	the dissolution if not effective on the date of date cannot be prior to or more than 90 days later this block does not meet the applicable statutor tive date on the Department of State's records.	nan date document is received for filing) y filing requirements, this date will not be
4.	A description of occurrence 605.0707, Florida Statutes.	that resulted in the limited liability compa (copy 605,0707 on back cover letter).	ny's dissolution pursuant to section
	Consent of the Member.	,,,	
5.	If there are no members, en	ter the name and address of the person app	ointed to wind up the company's
	activities and arians.	9604 Tavistock Court	2023
		Orlando, FL 32827	
			7 A*
6. ab	Signature of an authorized pove to wind up the company	person or if there are no members, the sign is activities and affairs:	nture of the person appointed and listed
	(M)	Jay N. Rayan	ν, ω
	Signature		Printed Name

From: Lewie Perryman Fax: 14072329822 To: Fax: (850) 617-6383 Page: 3 of 3 02/27/2023 11:07 AM

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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:	
Document number of Limited Liability Company is: L18000033	3870
Date of dissolution was: upon tiling	
Description of information that must be included in a written el.	aim:
Name of Claimant:	
Address of Claimant:	
Amount of Claim:	
Basis of Claim:	
Mailing address where claims can be sent: (Claims cannot be so	ent to the Division of Corporations)
Orlando, FL 32827	
A claim against the above named limited liability company will claim is commenced within 4 years after the filing of this notice	
· · · · · · · · · · · · · · · · · · ·	
Jay N. Rayan	Chip.