L18 0000 99393

(Re	equestor's Name)	
(1/0	equesions manner	
(A)		
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
·	·	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400340255404

02/13/20--01003--013 **25.00



MAR 0 7 2020

COVER LETTER

TO:

TO:	Registration Section Division of Corporations					
SHRIF	RIGHTWAY FAMILY LLC					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Name of Lim	ited Liability Compa	iny)			
The enc	closed Articles of Dissolution and fee(s) are subm	itted for filing.				
'lease r	return all correspondence concerning this matter to	o the following:				
	RICHARD SCHULTZ					
	(Na	ime of Person)				
	RIGHTWAY FAMILY LLC					
	(Fi	(Firm/Company)				
	3204 NE 16TH COURT	3204 NE 16TH COURT				
		(Address)				
	OCALA, FL. 34479					
	(City/S	tute and Zip Code)				
or furt	her information concerning this matter, please cal	l:				
	RICHARD SCHULTZ	352 at (427-1692			
	(Name of Person)	(Area C	ode & Daytime Telephone Number)			
Enclosed	I is a check for the following amount:					
=	\$25.00 Filing Fee and Certificate of Dissolution		g Fee, Certificate of Dissolution & Copy (additional copy is enclosed)			
	Mailing Address:	Street Addres	<u>s:</u>			
	Registration Section	_	Registration Section			
	Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
	Tallahassee, FL 32314		nroe Street, Suite 810			
		Tallahassee.	, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liabil RIGHTWAY FAMILY LLC	ity company is				
2.	The Articles of Organizatio	n were filed on 04/19/2018		_ and assigned		
	document number L180000	99393				
3.	Note: If the date inserted in t	the dissolution if not effective on the date of filing: 12/31/2019 e date cannot be prior to or more than 90 days later than date document is received for filing) this block does not meet the applicable statutory filing requirements, this date will not be etive date on the Department of State's records.				
4.	605.0707, Florida Statutes, (that resulted in the limited lial copy 605.0707 on back cover MEMBERS TO WITHDRAW A	letter).			
	,	MEMBERS TO WITHDRAW AI		· · · · · ·		
5.	If there are no members, en activities and affairs:	ter the name and address of the RICHARD SCHULTZ	e person appointed (o wind up the comp	any 20	
		3204 ne 16th court				
		Ocala, fl. 34479				
				<u> </u>	8: 05	
6. ab	Signature of an authorized pove to wind up the company	person or if there are no members activities and affairs:	ers, the signature of	the person appointe	d and listed	
_ ^	Signature	Rich	nard Schultz Printed	I Name		
	Ž	FILING FEE: S	\$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.

A claim against the above named limited liability corclaim is commenced within 4 years after the filing of RICHARD SCHULTZ		e
		e
		``
OCALA, FL. 34479	(D7m	
3204 NE 16TH COURT		
Mailing address where claims can be sent: (Claims ca	cannot be sent to the Division of Corporations) = 0	I
DISCRIPTION OF CLAIM OR GRIEVENCE		
COPY OF ANY AGREEMENT OR INVOICE		
DESCRIPTION OF CLAIM BEING ENTERED		
NAME AND ADDRESS OF PERSON FILING CLAIM	м	
Description of information that must be included in a	a written claim:	
Date of dissolution was:		
Document number of Limited Liability Company is:	L18000099393	

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