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.

(((H21000456082 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SMITH HULSEY & BUSEY

Account Number : 075030000653 Phone : (904)359-7700 Fax Number : (904)359-7708

LLC DISSOLUTION OR WITHDRAWAL OCABA STREET, LLC

AM 10; 50	A identification
<u></u>	is see
	1
	73 45
1207	
⇒	

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

Electronic Filing Menu Corporate Filing Menu

Help

(((H21000456082 3)))

ARTICLES OF DISSOLUTION OF OCABA STREET, LLC

ARTICLE 1

The name of this limited liability company is Ocaba Street, LLC (the "Company").

ARTICLE II

The Articles of Organization of the Company were filed on March 1, 2019 and assigned Document Number L19000060082.

ARTICLE III

The dissolution of the Company was authorized by written consent adopted by the sole member of the Company on December 10, 2021.

ARTICLE IV

All debts, obligations, and liabilities of the Company have been paid or discharged, or adequate provisions have been made therefor, pursuant to Section 605.0709, Florida Statutes.

ARTICLE V

All remaining property and assets of the Company have been distributed to its sole member in accordance with the governing documents of the Company and the Florida Revised Limited Liability Company Act.

ARTICLE VI

There are no suits pending against the Company in any court.

ARTICLE VII

The effective date of the dissolution of the Company shall be as of the date of filing these Articles of Dissolution.

Dated this 10th day of December, 2021.

OCABA STREET, LLC

SEL. IVAN OF STATE TALLAHASSEE, FLORIDA Manager

(((H21000456082 3)))

Notice of Limited Liability Company Dissolution

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 Limi	ited Liability Company:			-
Document nu	mber of Limited Liability Company is:			_
Date of dissol	oution was: December 10, 2021			
Description of	f information that must be included in a written claim:			
The identity an	ad contact information for the person or entity asserting the claim, a description of the basis for	r the clair	n,	
the date the cla	um arose, the amount of the claim, and a description of the facts and circumstances underlying	the clain	n.	- -
		·		_
				-
		PS E	2	-
Mailing addre	ess where claims can be sent: (Claims cannot be sent to the Division of Corporations)	HV)] EC 28	2021 DEC	
	Marc Villa	ASS	31.3	<u> </u>
	59 Sea Marsh Road	r GF	AM	LED
	Fernandina Beach, Florida 32034	ALS. VIS	<u> </u>	
		707	<u>ဒ</u>	
	ast the above named limited liability company will be barred unless a proceeding to en within 4 years after the filing of this notice.	iforce the	e clain	n is
Marc Villa	.l. n. 0			
	Printed Name of the Person Filing Signature of the Person Fil	ing	<u>~</u>	-

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