

h200000009522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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(Business Entity Name)

(Document Number)

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05/02/22 --01732--024 ♦♦25.00

2022 MAY 11 2:30

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Hawkins SHELTON, 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:

JOHN M<sup>c</sup>CAUGHERTY  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

9525 AQUA LN  
(Address)

ODESSA FL 33556  
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN M<sup>c</sup>CAUGHERTY at ( 727 ) 409-4500  
(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

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

1. The name of a limited liability company is

Hawkins Sheldon, LLC

2. The Articles of Organization were filed on 1/2/2020 and assigned

document number L20000009522

3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_  
(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.

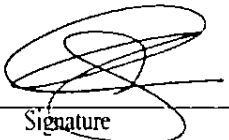
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

The LLC was created to purchase and develop a specific parcel of commercial real estate. The parcel was sold on March 17, 2023 and no further business is required.

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

John McCaugherty  
9525 AQUA LN  
ODESSA, FL 33556

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

John McCaugherty  
\_\_\_\_\_  
Printed Name

**FILING FEE: \$25.00**

FILED  
JAN 2 2020  
11:23:30

## 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: Hawkins Sheldon LLC

Document number of Limited Liability Company is: L20000009522

Date of dissolution was: 4/22/22

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


ANY AND ALL INFORMATION RELATED TO CLAIM INCLUDING  
DATE OF OCCURRENCE, DESCRIPTION OF CLAIM/ARTICLE, ETC,  
AMOUNT OF CLAIM, CAUSE OF CLAIM, WHO FILED CLAIM,  
WITNESSES TO CLAIM, EVIDENCE SUPPORTING CLAIM.

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

JOHN M'CAUGHERY  
9525 AQUA LN  
ODESSA, FL 33556

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.

JOHN M'CAUGHERY  
Printed Name of the Person Filing

  
Signature of the Person Filing