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DATE: 10/8/24

NAME:

DRE 5960, LLC

TYPE OF FILING: DISSOLUTION

COST:

25.00

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	gistration Section rision of Corporations			
SUBTRCT:	DRE 5960, LLC			
SOBJECT.		Liability Company	y)	
The enclosed	d Articles of Dissolution and fee(s) are submitted	d for filing.		Tin
Please return	all correspondence concerning this matter to the	e following:	:	
	JORDAN HEILMAN			
	(Name	of Person)		
	QUARLES & BRADY LLP			
	(Firm/	Company)		
411 E. WISCONSIN AVE. SUITE 2400				
	(Ad	ddress)		<u> </u>
	MILWAUKEE, WI 53202			
	(City/State	and Zip Code)	 .	
For further is	nformation concerning this matter, please call:			
Ю	RDAN HEILMAN	414 at (277-3034	
	(Name of Person)		le & Daytime Telephor	ne Number)
Enclosed is a	check for the following amount:			
€ \$25	5.00 Filing Fee and Certificate of Dissolution	•	Fee, Certificate of Disso py (additional copy is o	.
Re Di P.C	gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address: Registration S Division of C The Centre of 2415 N. Mon Tallahassee, F	Section orporations Tallahassee roe Street, Suite (810

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

2024 OCT -8 PM 12 26

1. The name of a limited liability company	ia	Cac,	- a-11F
• • •	18		CTARY OF PARIS.
DRE 5960, LLC			41.5St 1 · 1 ·
2. The Articles of Organization were filed	on FEBRUARY 4, 2020	_ and assig	ned
document number L20000032330			
3. The delayed effective date the dissolutio (effective date cannot be Note: If the date inserted in this block does listed as the document's effective date on the	prior to or more than 90 days later than date of some the applicable statutory filing r	locument is r	
4. A description of occurrence that resulted 605.0707, Florida Statutes, (copy 605.07)	07 on back cover letter).	ssolution po	irsuant to section
THE CONSENT OF SOLE MEMBER TO I	DISSOLUTION.		
			<u></u> _
	· •		<u> </u>
5. If there are no members, enter the name activities and affairs:	and address of the person appointed to	o wind up t	he company's
	·		
			<u> </u>
			
			<u> </u>
Signature of an authorized person or if the above to wind up the company's activities a	here are no members, the signature of and affairs:	the person	appointed and listed
Russell A Budd	Russell Budd, Manager		
Signature	Printed	Name	

FILING FEE: \$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. DRE 5960, LLC Name of Limited Liability Company: Document number of Limited Liability Company is: Date of dissolution was: 10/7/2024 Description of information that must be included in a written claim: THE LEGAL NAME OF THE CLAIMAINT, CLAIMANT'S ADDRESS AND OTHER CONTACT INFORMATION, THE NATURE OF THE CLAIM, THE DATE THE CLAIM OCCURED, AND THE AMOUNT OF THE CLAIM. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 4395 CORPORATE SOUARE NAPLES, FL 34104 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. RUSSEL BUDD Printed Name of the Person Filing Signature of the Person Hiling

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