

120 0000 44143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

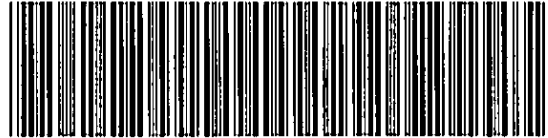
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

AS

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APR 25 2022

04/25/22--01006--012 \*\*25.00

FILED

APR 25 PM 4:27

SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 3717 CRABAPPLE 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:

Bradley Gies

(Name of Person)

Bradley Gies P.A.

(Firm/Company)

1983 PGA Blvd. Ste 104b

(Address)

Palm Beach Gardens, FL 33408

(City/State and Zip Code)

For further information concerning this matter, please call:

Bradley Gies

240

670-4437

at ( )

(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

FILED

APR 25 PM 4:27

SECRETARY OF STATE  
TALLAHASSEE, FL

1. The name of a limited liability company is

3717 CRABAPPLE LLC

2. The Articles of Organization were filed on 02/06/2020 and assigned

document number L20000044143

3. The delayed effective date the dissolution if not effective on the date of filing: 04/25/2022  
(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).

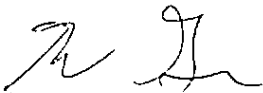
All members/managers voted to dissolve

All members/managers voted to dissolve

All members/managers voted to dissolve

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

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

Bradley Gies

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.

Name of Limited Liability Company: 3717 CRABAPPLE LLC

Document number of Limited Liability Company is: L20000044143

Date of dissolution was: 04/25/2022

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

The name of the claimant, address of the claimant, phone number of the claimant,

claim amount, and the detailed circumstances leading to the claim.

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

4188 WESTROADS DR

SUITE 112

WEST PALM BEACH, FL 33407

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.

Bradley Gies

Printed Name of the Person Filing



Signature of the Person Filing