

L20 000146645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

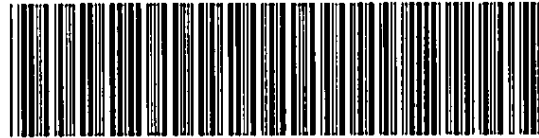
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/20/21--01019--017 **55.00

2022 APR 20 AM 7:00

O SIMMONS

JUN 09 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHADE SAFE 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:

PAUL J. WALLING
(Name of Person)

(w)
(Firm/Company)

171 JACKSON PARK AVENUE
(Address)

DAVENPORT, FLORIDA 33897
(City/State and Zip Code)

For further information concerning this matter, please call:

PAUL J. WALLING at (909) 450-4809
(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

2022 APR 20 AM 7:00

1. The name of a limited liability company is

SHADE SAFE LLC

2. The Articles of Organization were filed on 5/29/2020 and assigned

document number L200000146645

3. The delayed effective date the dissolution if not effective on the date of filing: 3/31/2021
(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).

FAILURE TO SECURE A FRANCHISE AGREEMENT.

NEVER OPERATED THE LLC.

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

PAUL J. WALLING - MEMBER

JUDITH A. WALLING - MEMBER

171 JACKSON PARK AVENUE

DAVENPORT, FL. 33897

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:

Paul J. Walling
Signature

PAUL J. WALLING
Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

2022 APR 20 AM 7:00

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: SHADE SAFE LLC

Document number of Limited Liability Company is: L20000146645

Date of dissolution was: 3/31/2021

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

NAME OF PERSON OR ENTITY FILING THE CLAIM

DESCRIPTION OF ITEM(S) CLAIMED

DATE(S), ADDRESS, PHONE(S), EMAIL(S)

REASON FOR THE CLAIM

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

PAUL J. WALLING

171 JACKSON PARK AVENUE

DAVENPORT, FLORIDA 33897

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.

PAUL J. WALLING
Printed Name of the Person Filing

Paul J. Walling
Signature of the Person Filing