

L21000058068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

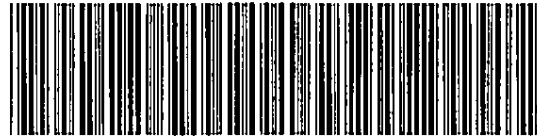
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

P21000 105058

Office Use Only

57
2-1-22



100379096771

FILED
Dec 29, 2021 08:00 AM
Secretary of State

01/12/22--01004--011 **125.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PARKWOOD DISTINCTIVE DELRAY CUSTOM HOMES LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Abandonment of Conversion and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BERNARD SCHLOSSBERG

Name of Person

SCHLOSSBERG & CO

Firm/Company

9900 WEST SAMPLE ROAD SUITE 316

Address

CORAL SPRINGS FL 33065

City/State and Zip Code

BSCHLOSSBERG1040@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BERNARD SCHLOSSBERG 954 646-2406

Name of Person at () Daytime Telephone Number
Area Code

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

FILED
Dec 29, 2021 08:00 AM
Secretary of State

STATEMENT OF ABANDONMENT OF CONVERSION

Pursuant to section 605.1044(3), Florida Statutes, I hereby submit the following Statement of Abandonment of Conversion prior to the effective date of the Articles of Conversion:

FIRST: The name of the converting limited liability company is:

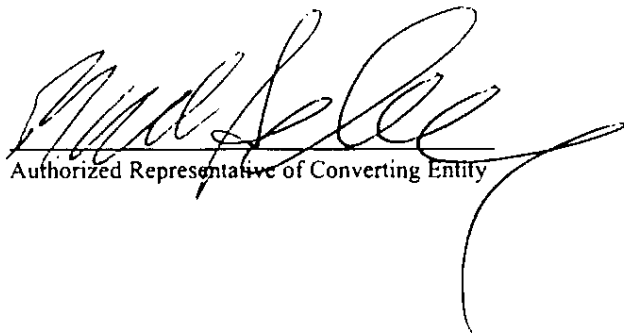
PARKWOOD DISTINCTIVE DELRAY CUSTOM HOMES LLC

SECOND: The date articles of conversion were delivered for filing is:

~~12/29/2021~~

12/20/2021

THIRD: The conversion has been abandoned in accordance with s. 605.1044, Florida Statutes.



Authorized Representative of Converting Entity

BERNARD SCHLOSSBERG

Typed or Printed Name of Signature

Signature of Authorized Representative

Typed or Printed Name of Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)