L21000101234

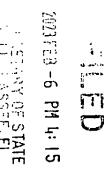
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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02/06/23--01028--010 **25.00



COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: GNED Proper ties, 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:				
Gerald D. Livingston				
GNED Properties, LLC (Firm/Company)				
2409 Brooke Willow Blud (Address)				
Kn OXVIIIe TN 37932 (City/State and Zip Code)				
For further information concerning this matter, please call: Cerald Livingston at 404, 867-0671 (Name of Person) (Area Code & Daytime Telephone Number)				
(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount: \$\sim \frac{1}{2}\$ \$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			

(see backside)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

TLED

1.	The name of a limited liability company is	2023 FEB -6 PM 4: 15	
	GNED Properties, LLC	LARY OF STATE	
2.	The Articles of Organization were filed on March 2, 2021	and assigned	
	document number <u>L21000161234</u>		
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 delayed. If the date inserted in this block does not meet the applicable statutory filing relisted as the document's effective date on the Department of State's records.	focument is received for filing)	
4.	A description of occurrence that resulted in the limited liability company's dis 605,0707, Florida Statutes, (copy 605,0707 on back cover letter).	ssolution pursuant to section	
	Property was sold and conveyed to a	nother over	
in July of 2022.			
5.	If there are no members, enter the name and address of the person appointed to activities and affairs: Cerald David Livingston		
	2409 Brooke Willow Bl	,	
	Knoxville, TN 37932		
6. ab	Signature of an authorized person or if there are no members, the signature of ove to wind up the company's activities and affairs:	the person appointed and listed	
10	erald D. Lewiston Gerald D. Signature Printed	Livingston Name	

FILING FEE: \$25.00