# L21000 15452

(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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## **COVER LETTER**

то:		ration Section on of Corporations					
SUBJE		REENTEES, LLC					
(Name of Limited Liability Company)							
		rticles of Dissolution and fee(s) are submitted correspondence concerning this matter to the	· ·				
	Diana Garcia						
	(Name of Person)						
	Nelson Mullins Riley & Scarborough LLP						
	(Firm/Company)						
	100 S.E. 3rd Avenue, Suite 2700						
		(Ad	dress)				
	Fort Lauderdale, Florida, 33394						
	(City/State and Zip Code)						
For further information concerning this matter, please call:							
Diana Garcia			954 745-5227				
		(Name of Person)	at ()				
Enclose	đ is a chec	ck for the following amount:					
3	\$25.00	Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee. Certificate of Dissolution & Certified Copy (additional copy is enclosed)				
	Regisi Divisi P.O. I	g Address: tration Section on of Corporations Box 6327 nassee, 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

. The name of a limited li GREENTEES, LLC	ability company is	
The Articles of Organiz	ation were filed on 4/12/2021	and assigned
document number L210	00154536	
(effe Note: If the date inserted	ate the dissolution if not effective on the ctive date cannot be prior to or more than 90 dall in this block does not meet the applicable effective date on the Department of State's	ys later than date document is received for filing) statutory filing requirements, this date will not be
A description of occurre 605.0707, Florida Statut	ence that resulted in the limited liability es. (copy 605.0707 on back cover letter	company's dissolution pursuant to section r).
	s and managers of the limited liability com	
If there are no members	enter the name and address of the pers	son appointed to wind up the company'
activities and affairs:		
		<b></b>
		06
		-
Signature of an authoriz gove to wind up the comp	ed person or if there are no members, t any's activities and affairs:	he signature of the person appointed and listed
ana Ang	Dana An	gelino
Signatur		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: GREENTEES, LLC	
Document number of Limited Liability Company is: 1.21000154536	
Date of dissolution was:	
Description of information that must be included in a written claim:	
All claims must be provided in writing and all claims must be made within 4 years after the filing of	of this notice.
Claims must not be sent to the Florida Department of State, Division of Corporations.	2023 ,
	<b>E</b> 25
	PM L:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corpo	rations)
1210 Stirling Rd	
Suite 3B	
Dania Beach, FL 33004	
A claim against the above named limited liability company will be barred unless a proceed claim is commenced within 4 years after the filing of this notice.	ling to enforce the
Dana Angelino Dava Angelino	zhuo_
Printed Name of the Person Filing Signature of the Person	h Filing

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