

L21000186294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

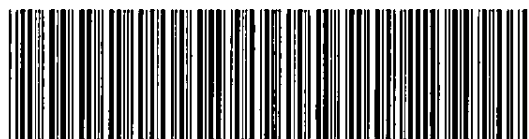
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03/01/24--01026--002 **25.00

11-11-24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 321 Rosemary Ridge, 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:

Cary J. Goggin, Esq.

(Name of Person)

Lawhon Goggin, LLP

(Firm/Company)

3003 Tamiami Trail N., Ste. 200

(Address)

Naples, FL 34103

(City/State and Zip Code)

For further information concerning this matter, please call:

Cary J. Goggin, Esq.

(Name of Person)

239

325-8956

at (_____) _____

(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**

1. The name of a limited liability company is

321 Rosemary Ridge, LLC

2. The Articles of Organization were filed on 04/29/2021 and assigned

document number L21000186294

3. The delayed effective date the dissolution is not effective on the date of filing: January 1, 2024
(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).

This company has achieved its purpose and is no longer necessary.

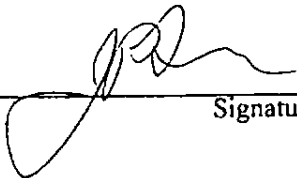
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

James P. Lemastus

1220 East Oak St

Louisville, KY 40204

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

James P. Lemastus

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: 321 Rosemary Ridge, LLC

Document number of Limited Liability Company is: L21000186294

Date of dissolution was: 01/01/2024

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

Name, address, and telephone number of the claimant, the date of the claim, the identification of any document or contract that gives rise to the purported claim, a description of the acts or omissions giving rise to the purported claim, and the amount of the purported claim.

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

c/o Cary Goggin, Esq

3003 Tamiami Trail N., Suite 200

Naples, FL 34103

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.

James P. Lemastus

Printed Name of the Person Filing



Signature of the Person Filing

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