

L22000366778

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

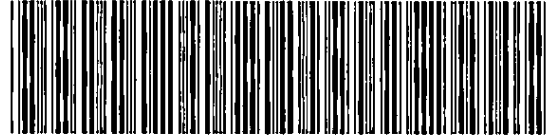
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

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700435753187

LLC dissolution

FILED  
2024 AUG 30 PM 12:30  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
2024 AUG 30 PM 1:51  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

A. RAMSEY

SEP 3 2024

**Sunshine State Corporate Compliance Company**

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

①

DATE 08/30/2024

**\*\*WALK IN\*\***

ENTITY NAME Tavares Heritage Square, LLC

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXXXXXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$25

ACCOUNT #: I20160000072

*S. B. J. M.*

Please call Tina at the above number for any issues or concerns. Thank you so much!

FILED

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

2024 AUG 30 PM 12:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
TAVARES HERITAGE SQUARE, LLC (F/K/A TAVARES CAGAN URBAN DEVELOPMENT, LLC)
2. The Articles of Organization were filed on 8/22/2022 and assigned  
document number L22000366778
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 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).  
ALL MEMBERS CONSENT TO THE DISSOLUTION.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  
BRYAN CAGAN  
16554 CAGAN CROSSINGS BOULEVARD, SUITE 4  
CLERMONT, FL 34714  
\_\_\_\_\_
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

BRYAN CAGAN

Printed Name

FILING FEE: \$25.00