L23000437248

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







Office Use Only

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 10/12/2023 **WALK IN** ENTITY NAME Wesley Chapel-HD, LLC DOCUMENT NUMBER **PLEASE FILE THE ATTACHED AND RETURN** XXXXXXX 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 #: 120160000072

-5. 8 FM

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

STATEMENT OF TERMINATION .

Pursuant to section 605.0709(7), Florida Statutes, I h	nereby submit the following Statement of Termination:	
FIRST: The name of the limited liability company i	is:	
Wesley Chapel-HD, LLC		
SECOND: The Florida Document number of the lir	mited liability company is:	
THIRD: The date of filing of the initial articles of organization is:		
FOURTH: The date of filing of the dissolution is:	October 10, 2023	

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

Signature of Authorized Representative

Bryan B. DeBoer

Typed or printed name of signature

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



CR2E141 (2/14)

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