

L920000000000000000000000

(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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2023 JAN -3 AM 9:45

SECRETARY OF STATE
TALLAHASSEE - FLORIDA

A. RIVERS

MAR 13 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Golf Park L.C.

(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:

Hellena Smejda

(Name of Person)

Canadex Corporation

Managing Partner

(Firm/Company)

2121 NE 40th Ave

(Address)

Ocala, FL 34470

(City/State and Zip Code)

For further information concerning this matter, please call:

Hellena Smejda

352

875-8156

at ()

(Name of Person)

(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
2111 21st Street, Suite 201
Tallahassee, FL 32310

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Golf Park L.L.C.

2. The Articles of Organization were filed on Dec. 14, 1992 and assigned

document number 1.92000000060

3. The delayed effective date the dissolution if not effective on the date of filing: Dec. 31, 2022
(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).

Members unanimously voted to dissolve the limited liability company.

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

activities and affairs: Hellena A. Smejda

2121 NE 40th Ave

Ocala, Florida 34470

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Hellena A. Smejda
Signature

Hellena Smejda

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: Golf Park L.L.C.

Document number of Limited Liability Company is: _____

Date of dissolution was: December 31, 2022

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

Name of Claimant

Address of Claimant

Amount of Claim

Documents Supporting the Claim

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

Hellena Smejda

2121 NE 40th Ave

Ocala, FL 34470

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.

Hellena A. Smejda

Printed Name of the Person Filing

Hellena A. Smejda

Signature of the Person Filing

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

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STATE
FLORIDA
TALLAHASSEE