L98 0000000361

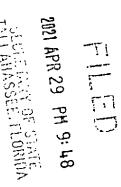
(Re	questor's Name)			
(Ad	dress)	-		
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL.		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



600365013066

04/29/21--01015--017 **25.80



The

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corporations				
SUBJECT: OAK RIDGE CROSSINGS L.L.C. (Name of Limited Liability Company)				
(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:				
 2				
JAMES O. DUFFY				
(Nane	or re(son)			
(Firm Company)				
130 CRANES	1000			
135 CRANES LAKE DRIVE				
PUNTE VEDRA, FL 32082 (City State and Zip Code)				
(City State and Zip Code)				
For further information concerning this matter, please call:				
	781 210-0722			
(Name of Person)	at (73			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
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)			
Mailian Addrass	Street Address:			
Mailing Address: Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	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 OAK RIDGE CROSSINGS L.L.C.				
2.	2. The Articles of Organization were filed on MARCH 23,1998 and assigned				
	document number 1 9800000361				
3.	e delayed effective date the dissolution if not effective on the date of filing: APRIL 26, 202 (effective date cannot be prior to or more than 90 days later than date document is received for filing) te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ted 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). SOLE REAL PROPERTY RSSET SULD				
	ALL CASH DISTRIBUTED				
	NEC A	, , , , , , , , , , , , , , , , , , , 			
	PR 29	- 1			
5.	If there are no members, enter the name and address of the person appointed to wind up the company's				
	activities and affairs: TAMES O. DUFFY S				
	135 CRANES LARE DR SH &				
	PONTE VEDRA, FL 32082				
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and list ove to wind up the company's activities and affairs:	ed			
Æ	Signature JAMES O. DUFFY4726 1	LI			
/	FILING FEE: \$25.00				

(