

LD0000000 5587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

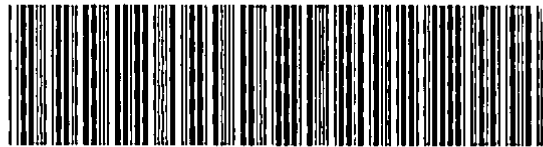
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 05 2019

FILED
19 FEB 25 AM 12:03
MAR 05 2019

V/D

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAY'S MERE CO. L.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:

LLOYD M. SIGEL
(Name of Person)

BAY'S MERE CO. L.L.C.
(Firm/Company)

1342 NOBLE HERON WAY
(Address)

NAPLES FL 34105
(City/State and Zip Code)

For further information concerning this matter, please call:

LLOYD SIGEL at (239) 261-5985
(Name of Person) (Area Code & Daytime Telephone Number)

612-963-9040 - Cell

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of a limited liability company is

BAY'S MERE COMP^{ANY} LLC

2. The Articles of Organization were filed on 5/11/2000 and assigned

document number _____

L00000005587

3. The delayed effective date the dissolution if not effective on the date of filing: 3/1/2019
(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).

BUSINESS ACTIVITY WAS SOLD. NO FURTHER
ACTIVITY PLANNED OR CONDUCTED.

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

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

Lloyd M. SIGEL
Printed Name

FILING FEE: \$25.00

FILED

19 FEB 25 AM 12:03