(Re	equestor's Name)	
(Ac	ddress)	"
(Ac	dress)	
(Ci	ty/State/Zip/Phone	#)
•	7	,
PICK-UP	☐ WAIT	MAIL MAIL
(D)		
(Bl	isiness Entity Name	e)
	ocument Number)	
(DC	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		ŀ





600042356146

11/02/04--01023--012 **43.75

2005 MAR -7 PM 12: 18

01/15/04



November 10, 2004

ROB RAYMOND 310 ROYAL PALM WAY PALM BEACH, FL 33480

SUBJECT: FLOATING DOCKS/GREECE, LLC

Ref. Number: L01000017564

We have received your document for FLOATING DOCKS/GREECE, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 704A00064322

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT:FLOATING DOCKS/G	GREECE, LLC
DOCUMENT NUMBER: _L0100001756	5.4
The enclosed Articles of Dissolution and fee a	
Please return all correspondence concerning thi	s matter to the following:
Mr. Rob Raymond (Name of Pers	(01)
Palm Beach Yacht	Brokerage, Inc.
(Name of Firm	ıv
`	ddress) ASECRALL AND ASECRAL AND ASECRAT ASECRAL AND ASECRAT AND ASECRAT ASECRATICANA ASECRATICANA ASECRATICA AND ASECRATICANA ASECR
Palm Beach, FL 33	480 5 5
(City/State	/and Zip Code) SA
For further information concerning this matter,	SECRETARY OF STATE AND A PH I2: 18 1480 January Of State Florida January Of Sta
Diane Raymond	at (<u>561</u>) <u>835–8393</u>
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status (A	S43.75 Filing Fee & \$\sup \\$52.50 Filing Fee, Certified Copy Additional copy is enclosed) \$\sum_{\text{square}} \square \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Attn: Ms. Tammy Kline **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Re:

Dissolution of Corporation, LLC -

Floating Docks/Greece, LLC Document # L01000017564

Dear Ms. Kline:

Please find enclosed the form you requested for the Dissolution of Corporation LLC. our conversation today @ 1:00 pm, you stated this was the only form that would be necessary to dissolve the Floating Docks, Greece LLC.

I previously sent in a check for \$43.75 (Check # 5011) which has cleared with my bank for payment and acknowledgement of the Dissolution process. This check accompanied Articles of Dissolution (which you mentioned was not needed), Transmittal Letter, Stockholder's Consent, and Articles of Dissolution. I am forwarding with the LLC Dissolution required, copies of the above mentioned documents.

Please let us know if information and payment you have now received is sufficient. If you would like to reach me during work hours – please free call me at 561/835-8393.

I look forward to receiving the Dissolution document as soon as possible.

Thank you for your assistance.

Sincerely,

Diane Raymond

TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations	•		
SUBJECT: FLOATING DOCK	S/GREECE, LLC		
DOCUMENT NUMBER: _L0100001	7564		
The enclosed Articles of Dissolution and f	ee are submitted for	filing.	
Please return all correspondence concerning	g this matter to the fo	ollowing:	
Mr. Rob Raymon			
(Name of	rerson)		
Palm Beach Yac (Name of	ht Brokerage. Firm/Company)	Inc.	TAL
310 Royal Palm	Way		LAH
	(Address)		ASSE
Palm Beach, FL (City/S	State/and Zip Code)		E, FLORIDA
Diane Raymond			·
(Name of Person)	(Area Code &	& Daytime Telephone N	lumber)
Enclosed is a check for the following amou	nt:		
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Sta	itus &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 323	-

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1: The name of the limited liability company is			
2. The date the dissolution was approved: August 1, 2004			;
 A description of the occurrence that resulted in the limited liability company's dissolution pursuar section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter). 	u to		
DIFFERENCE OF SPINION IN OPERATING MA	TTERS		
¿ PROCEDURES			
			
4. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. OR-			
Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421			
All remaining property and assets have been distributed among its members in accordance with the respective rights and interests.	्रें र _		
6. CHECK ONE: 12 There are no suits pending against the company in any court. 2-OR-	TAL	201	
Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.	CRET	35 MAF	مودد د
Signatures of the members having the same percentage of membership interests necessary to appropriate dissolution:	ARY O	1005 MAR -7 PM 12:	
Signature Typed or Printed came	F ST	PH	
MELITAS DIONYSSIS	PATE ATE	-3: -8	
Robert W. Raymor	d		
		_	

RESERVE SPACE OF