

LO1 000019572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

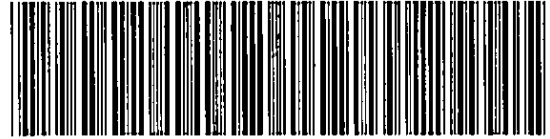
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/25/21--01014- -012 **25.00

R. W. F. T.
JUL 28 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2021 JUL 26 PM 1:12

July 2, 2021

MICHAEL SWEET
13555 BISHOPS CT #345
BROOKFIELD, WI 53005

SUBJECT: CLEARWATER BAY MARINA, LLC
Ref. Number: L01000019572

We have received your document for CLEARWATER BAY MARINA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Notice of Dissolution cannot be filed before the articles of dissolution. Please see the enclosed information.

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) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 221A00015265

*Mailed back to
7/21/21*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Clearwater Bay Marina LLC
(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:

Michael Sweet
(Name of Person)

Decade Properties, Inc
(Firm/Company)

13555 Bishops Ct, #345
(Address)

Brookfield, WI 53005
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Sweet at (262) 797-9215
(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
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

Clearwater Bay Marina, LLC

2. The Articles of Organization were filed on November 13, 2001 and assigned

document number LO1000019572

3. The delayed effective date the dissolution if not effective on the date of filing: _____

(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).

The sale of substantially all of the assets
occurred in December 2019. In December 2020
the Members unanimously voted to
dissolve the company.

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

Michael Sweet
Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

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: CLEARWATER BAYMARINA, LLC

Document number of Limited Liability Company is: L01000019572

Date of dissolution was: 12/31/2020

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

- 1) State the total amount owed to the creditor.

- 2) State the type of debt or how it was incurred.

- 3) State the debtor's account or other number used by the creditor to identify the debtor.

- 4) List the amount of all payments received toward the debt that the creditor gave the debtor for when calculating the amt of the ^{the} claim.

- 5) Attach copies of any documents that show the debt exists and any lien that secures the debt.

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

DECADE PROPERTIES, INC.


13555 BISHOPS COURT, #345

BROOKFIELD, WI 53005

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.

MICHAEL SWEET

Printed Name of the Person Filing



Signature of the Person Filing