

L020000010235

(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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04/25/16--01042--025 **25.00

FILED
2016 MAY 16 P 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 17 2016

SWABEN



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 26, 2016

RAYMOND A. ROSS III
185 TWELVE OAKS LANE
PONTE VEDRA BEACH, FL 32082

SUBJECT: RAYMAC GULFVIEW, LLC
Ref. Number: L02000010235

We have received your document for RAYMAC GULFVIEW, 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):

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) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 516A00008657

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Ray Mac Golfview 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:

Raymond A Ross III
(Name of Person)

(Firm/Company)

185 Twelve Oaks Lane
(Address)

Ponte Vedra, FL 32082
(City/State and Zip Code)

For further information concerning this matter, please call:

Raymond Ross III
(Name of Person)

at (904) 273-7088
(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/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

Raymax Gulfview LLC

2. The Articles of Organization were filed on April 29, 2002 and assigned

document number LO2000010235

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

Sold assets and went out of Business

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

~~Raymond A. Ross III~~
Raymond A. Ross III

185 Twelve Oaks Lane

Ponte Vedra, FL 32082

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

Raymond A. Ross III
Printed Name

FILING FEE: \$25.00

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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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: RayMac Gulfview LLC

Document number of Limited Liability Company is: LD2000010235

Date of dissolution was: 12-31-2015

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

Name, address, phone number, date of claim,
date filing claim and reason for claim

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

Raymond A. Ross III
185 Twelve Oaks Lane
Ponte Vedra, FL 32082

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.

Raymond A. Ross III
Printed Name of the Person Filing

Raymond A. Ross III
Signature of the Person Filing

FILED
2016 MAY 16 P 2 12
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TALLAHASSEE, FLORIDA