

L02000029026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

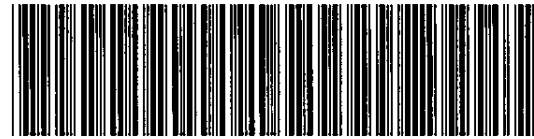
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/23/14--01003--010 **25.00

FILED

2014 JAN 23 PM 4: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
JAN 28 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Banana Bay I, 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:

Jana Hamilton

(Name of Person)

Banana Bay I, LLC

(Firm/Company)

PO Box 511315

(Address)

Punta Gorda, FL 33951

(City/State and Zip Code)

For further information concerning this matter, please call:

Jana Hamilton

(Name of Person)

at (941) 345-7080

(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**

FILED
2014 JAN 23 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Banana Bay I, LLC

2. The Articles of Organization were filed on 10/31/2002 and assigned
document number L02000029026

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

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 of LLC was concluded.

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

Jana Hamilton

PO box 511315

Punta Gorda, FL 33951

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

Printed Name



Jana Hamilton

FILING FEE: \$25.00