## L030000 14929

	(Requestor's Name)	<del></del>
	Ms. Carla Rayman 5596 Eastwind Dr. Sarasota, FL 34233-5079	<u> </u>
	(Address)	
	(City/State/Zip/Phone #)	<del></del>
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TALLAHASSEE, FLORID



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 17, 2003

MS CARLA RAYMAN 5596 EASTWIND DR SARASOTA, FL 34233-5079

SUBJECT: AQUA PROPERTIES, LLC

Ref. Number: L03000014929

03 OCT 24 PM 4: 16

We have received your document for AQUA PROPERTIES, 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):

Please complete question #3 on the document, a letter wasn't attached.

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) 245-6097.

Letter Number: 003A00056772

Marsha Thomas Document Specialist

ARTICLES OF DISSOLUTION
FOR
A FLORIDA LIMITED LIABILITY COMPANY

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 their respective rights and interests.  CHECK ONE:  There are no suits pending against the company in any court.  OR-  Adequate provision has been made for the satisfaction of any judgment, order or decree, which may be entered against it in any pending suit.  Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:	1. The name of the limited liability company is _	Aqua Properties, LLES =
Osection 608.441, Florida Stannes, (copy of 608.441 on back of cover letter).  Sec. 3413chcd letter  Blundskid by 3410meyrof to use the name  Aquato 8.98bctd from with leatester.  4. CHECK ONE:  The 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.  5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.  6. CHECK ONE:  There are no suits pending against the company in any court.  OR.  Adequate provision has been made for the satisfaction of any judgment, order or decree, which may be entered against it in any pending suit.  Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:  Typed or Printed name  **Delta Layman**  **Delta Stwind Delta**  Sala Signature  **Typed or Printed name**  **Delta Stwind Delta**  **Sala Signature Typed or Printed name**  **Delta Stwind Delta**  **Sala Signature Typed or Printed name**  **Delta Stwind Delta**  **Sala Signature Typed or Printed name**  **Delta Stwind Delta**  **Sala Signature Typed or Printed name**  **Delta Stwind Delta**  **Delta Stwind Delta**  **Sala Signature Typed or Printed name**  **Delta Stwind Delta**  **Sala Signature Typed or Printed name**  **Delta Stwind Delta**  **Sala Signature Typed or Printed name**  **Delta Stwind Delta**  **Sala Signature Typed or Printed name**  **Delta Stwind Delta**  **Sala Stwind Del	2. The effective date of the limited liability comp	pany's dissolution is 9/13/03
Benasted by attended to 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 their respective rights and interests.  CHECK ONE: There are no suits pending against the company in any court.  OR- Adequate provision has been made for the satisfaction of any judgment, order or decree, which may be entered against it in any pending suit.  Signatures of the members having the same percentage of membership interests necessary to approve the flissolution:  Typed or Printed name  ORA  ORA  Typed or Printed name  ORA  ORA  Typed or Printed name  ORA  ORA  Typed or Printed name		
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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.  5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.  6. CHECK ONE:  There are no suits pending against the company in any court.  OR-  Adequate provision has been made for the satisfaction of any judgment, order or decree, which may be entered against it in any pending suit.  Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:  Typed or Printed name  Alalyman  Typed or Printed name  Signature  Typed or Printed name  Signature  Typed or Printed name		
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be entered against it in any pending suit.  Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:  Typed or Printed name    Dola Rayman	<ul> <li>OR-</li> <li>Adequate provision has been made for the deb</li> <li>All remaining property and assets have been d respective rights and interests.</li> <li>CHECK ONE:</li> <li>There are no suits pending against the compan-OR-</li> </ul>	ots, obligations and liabilities pursuant to s. 608.4421.  Istributed among its members in accordance with their by in any court.
Signature  Typed or Printed name  Laria Rayman  5596 Eastward Dr.  Sarasita, FL34233	Adequate provision has been made for the satistic be entered against it in any pending suit.	sfaction of any judgment, order or decree, which may
Tota Rayman  5596 Eastword Dr.  Sarasita, Fl. 34233	Signatures of the members having the same perce dissolution:	mtage of membership interests necessary to approve the
5596 Eastword Dr. Sarasita, FL34233	Signature	Typed or Printed name
5596 Eastword Dr. Sarasita, FL34233	makuman	Parla Rayman
Sarasita, FL34233		55910 bastond DV.
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(741) 421-3307 12		<b>4</b>
		(141) 761-3307 NOS

Filing Fee: \$25.00