

LD3000022019

(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



400174427384

04/05/10--01017--014 **25.00

FILED
10 APR 19 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

APR 20 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2010

EUGENE IRVINE
3460 BALLYBRIDGE CR UNIT 102
BONITA SPRINGS, FL 34134

SUBJECT: VACATION RENTALS LLC
Ref. Number: L03000022019

We have received your document for VACATION RENTALS 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):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, must be contained in the document.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 110A00008444

FILED
10 APR 19 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vacation Rentals 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:

Eugene Irvine

(Name of Person)

(Firm/Company)

3460 Ballybridge Cr unit 102

(Address)

Bonita Springs, FL 34134

(City/State and Zip Code)

For further information concerning this matter, please call:

Gene Irvine

(Name of Person)

at (239) 9922679
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
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

FILED
10 APR 19 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Vacation Rentals LLC

2. The Articles of Organization were filed on 06/17/2003 and assigned document number L03000022019

3. The date the dissolution was approved: 3/31/2010

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

My expense IS MORE THAN MY INCOME

5. 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.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. 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:

Signature

Eugene Irvine

Printed Name

Eugene Irvine

FILED
10 APR 19 PM 4:30
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILING FEE: \$25.00