

2050000 14883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

MAY 29 2018  
J. HARRIS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Bay Villa LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gary Onderdonk  
Name of Person

513 Fleming St STF 1  
Firm/Company

513 Fleming St, Suite 1  
Address

Key West FL 33040  
City/State and Zip Code

clonderdonk@ACH.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Onderdonk at (315) 727-4305  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:** ✓

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 3, 2018

GARY ONDERDONK  
413 FLEMING ST SUITE 1  
KEY WEST, FL 33040

SUBJECT: BAY VILLA, LLC  
Ref. Number: L05000014883

We have received your document for BAY VILLA, 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 Statement of Termination may be filed after the limited liability company has completed winding up and after a voluntary dissolution has been filed with this office. See section 605.0709(7), Florida Statutes for reference.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 718A00009140

RECEIVED

2018 MAY 25 AM 9:36

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32314

DEPARTMENT OF STATE  
TALLAHASSEE, FL 32314

2018 MAY 25 AM 6:12

FILED

**STATEMENT OF TERMINATION**

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

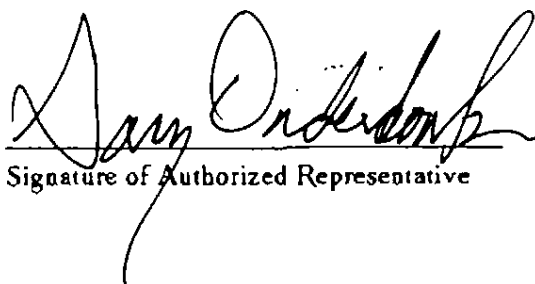
**FIRST:** The name of the limited liability company is: Bayville LLC

**SECOND:** The Florida Document number of the limited liability company is: 605000014883

**THIRD:** The date of filing of the initial articles of organization is: 2/11/05

**FOURTH:** The date of filing of the dissolution is: 5/31/18

**FIFTH:** This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.



Signature of Authorized Representative

Gary Ondaenkov

Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

CR2E141 (2/14)

FILED  
2018 MAY 25 AM 6:12  
CLERK OF CIRCUIT COURT  
HALL COUNTY FLORIDA