

L05000014883

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
2010 MAY 25 AM 6:12
CLERK OF SUPERIOR COURT
CALIFORNIA

MAY 29 2010
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bay Villa 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:

Gary Onderdonk
(Name of Person)

(Firm/Company)

513 Fleming St #1
(Address)

Key West, Florida 33040
(City/State and Zip Code)

or Donderdonk@aol.com

For further information concerning this matter, please call:

Gary Onderdonk at (315) 7274305
(Name of Person) (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

Bay Villa LLC

2. The Articles of Organization were filed on 2-11-05 and assigned

document number LOS000014883

3. The delayed effective date the dissolution if not effective on the date of filing: 5-31-18
(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).

all assets sold + distributed

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

6. Signature of an authorized person or if there are no members, the signature of the person appointed listed above to wind up the company's activities and affairs:

Gary Oorderdonk
Signature

Gary Oorderdonk
Printed Name

FILING FEE: \$25.00

FILED
2018 FEB 25 AM 12
TALLAHASSEE, FLORIDA
STATE DEPARTMENT OF REVENUE