# 405000101176

(Requestor's Name)			
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### **COVER LETTER**

TO:

	istration Section ision of Corporations	
UBJECT:	SAIL FISH PROPERTIES, LLC	
(ADJILOT)	(Name of Limi	ted Liability Company)
he enclosed	Articles of Dissolution and fee(s) are submi	tted for filing.
	all correspondence concerning this matter to	•
	ALBERT J. STOPKA, III, ESQ.	
	(Na	me of Person)
	ALBER J. STOPKA, III, P.A.	
	(Fir	m/Company)
	108 MOSLEY DRIVE	
		(Address)
	LYNN HAVEN, FL 32444	
	(City/St	ate and Zip Code)
r further in	formation concerning this matter, please call	I:
AL	BERT J. STOPKA, III	850 785-6600
	(Name of Person)	at ()
closed is a c	heck for the following amount:	
<b>■</b> \$25.	00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
	ling Address:	Street Address:
	gistration Section ision of Corporations	Registration Section Division of Corporations
P.O	). Box 6327	The Centre of Tallahassee
Tal	lahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is SAIL FISH PROPERTIES, LLC	
2. The Articles of Organization were filed on	0/13/2005 and assigned
document number 1.05000101176	<u>.                                    </u>
	to or more than 90 days later than date document is received for filing) meet the applicable statutory filing requirements, this date will not be
4. A description of occurrence that resulted in the 605.0707. Florida Statutes, (copy 605.0707 or	he limited liability company's dissolution pursuant to section n back cover letter).
Unanimous consent of all members.	
Unanimous consent of all members.  Unanimous consent of all members.	
	1021 AT
5. If there are no members, enter the name and a activities and affairs:	address of the person appointed to wind up the company's
	F S ATE
6. Signature of an authorized person or if there above to wind up the company's activities and a	are no members, the signature of the person appointed and listed (ffairs:
Showing County	Carlton S. Schwartz
Signature	Printed Name

FILING FEE: \$25.00

### Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: SAIL FISH PROPI	ERTHES, LLC
Document number of Limited Liability Company is: 1.0	5000101176
Date of dissolution was: 09/01/2021	
Description of information that must be included in a w	ritten claim:
THE NAME AND ADDRESS OF THE CLAIMANT, THE	AMOUNT OF THE CLAIM, THE BASIS
OF THE CLAIM AND SUPPORTING DOCUMENTATION	N
Mailing address where claims can be sent: (Claims cam	not be sent to the Division of Corporations)
3001 W. FOTH STREET	
UNIT 101-A	
PANAMA CITY, FL 32401	
A claim against the above named limited liability comp claim is commenced within 4 years after the filing of th	any will be barred unless a proceeding to enforce the is notice.
	1. 11 , 11
Carlton S. Schwartz	and i all
Printed Name of the Person Filing	Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00