

L060000 89695

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

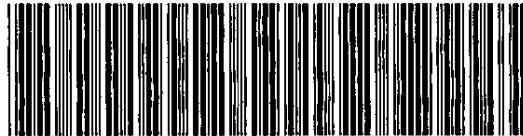
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/28/15--01035--022 **25.00

CLERK OF COURT
2015 DEC 28 PM 1:28
FALL HARBOR, FLORIDA

DEC 30 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Bluewater Business Development, 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:

Howie Lyke

(Name of Person)

Bluewater Business Development, LLC

(Firm/Company)

2200 Winter Springs Blvd., STE 106-292

(Address)

Oviedo, Florida 32765

(City/State and Zip Code)

For further information concerning this matter, please call:

Howie Lyke

(Name of Person)

at **407 373-9983**

(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

Bluewater Business Development, LLC

2. The Articles of Organization were filed on September 13, 2006 and assigned

document number L06000089695

3. The delayed effective date the dissolution if not effective on the date of filing: December 31, 2015
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

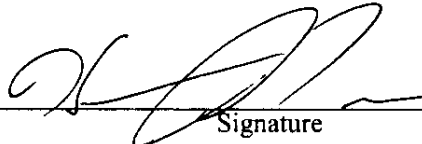
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Is the consent of all members to dissolve this company, and as stated by the current Operating Agreement.

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

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


Signature

Howie Lyke

Printed Name

FILING FEE: \$25.00

2015 DEC 28 PM 1:28
CLERK OF THE
TREASURY
TALLAHASSEE FLORIDA