

#L07000013787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

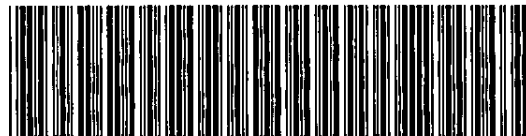
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/24/15--01036--012 **25.00

FILED

2015 MAY 21 AM 8:37

SECRETARY OF STATE
TALLAHASSEE, FL 32310

K. SALLY
EXAMINER
JUN -2 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 5, 2015

GOUZELAW GROUP, PA
CATHERINE E. GOUZE ESQ.
345 BAYSHORE BLVD. #1208
TAMPA, FL 33606

SUBJECT: THE RIVERS VIEW HOTEL. LLC
Ref. Number: L07000013787

We have received your document for THE RIVERS VIEW HOTEL. 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):

The dissolution must be pursuant to statute 605 as of January 2015. Please remove all reference to statute 608 from your 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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 315A00009321

RECEIVED
15 MAY 21 PM 4: 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Rivers View Hotel, 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:

Catherine E. Gouze, Esq.

(Name of Person)

GouzeLaw Group, PA

(Firm/Company)

345 Bayshore Boulevard #1208

(Address)

Tampa, FL 33606

(City/State and Zip Code)

For further information concerning this matter, please call:

Catherine Gouze

(Name of Person)

813

507-1386

at (

) (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

FILED

2015 MAY 21 AM 8:38

1. The name of a limited liability company is
The Rivers View Hotel, LLC

CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA

2. The Articles of Organization were filed on 02/06/2007 and assigned
document number L07000013787

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

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).

Dissolution upon written consent of all the members of the limited

liability company. 605.0701(2)

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:

Alexander Samardzick
Signature

The Rivers View Hotel, LLC

Printed Name

By: Sebastian Hotel, LLC Mgr Member
FILING FEE: \$25.00
By: Alexander Samardzick
mgr. Member