

LO70000 39472

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

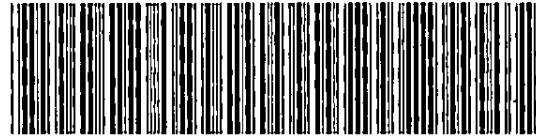
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800328051478

04/22/19--01012--025 \*\*25.00

FILED  
2019 MAY 22 PM 4:28

CUS  
AND DISS

MAY - 2 2019

I ALBRITTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Blue Wave, 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:

Margie Lambakis

(Name of Person)

Wilson Ratledge, PLLC

(Firm/Company)

4600 Marriott Drive, Suite 400

(Address)

Raleigh, NC 27612

(City/State and Zip Code)

For further information concerning this matter, please call:

Margie Lambakis

(Name of Person)

at ( 919 ) 787-7711

(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  
2013 JUN 22 PM 4:28  
CLERK

1. The name of a limited liability company is  
Blue Wave, LLC

2. The Articles of Organization were filed on 04/12/2007 and assigned  
document number L07000039472

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)  
**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).  
The consent of all the members.

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Safari International, LLC, Manager 6491 S NC 231 HWY, Middlesex, NC 27557

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:

Wanda Gail Peele  
Signature

Safari International, LLC, Manager, by: The DR Trust,  
Manager, By: Wanda Gail Peele, Trustee

Printed Name

FILING FEE: \$25.00

Wanda Gail Peele