L01000050258

(Requestor's Name)				
(Address)				
(Address)				
(identity				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
·	cument Number)			
(,			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



800278408858

10/26/15--01038--006 **25.00

FILEU 2015 OCT 26 PH 3 21 SECHELARY OF STATE

COVER LETTER

SUBJECT: _	JLFR Boat House, LLC (Name of Limit	ed Liability Compa	nny)		
he enclosed	Articles of Dissolution and fee(s) are submit	ted for filing.			
lease return a	all correspondence concerning this matter to	the following:			
	Frank P. Ripa				
(Name of Person)					
	JLFR Boathouse, LLC				
	(Firm/Company)				
	1409 Tech Blvd, Suite 1				
	((Address)			
	Tampa, FL 33619				
	(City/Sta	te and Zip Code)			
For further inf	formation concerning this matter, please call:				
Fra	nk P. Ripa	813	623-6777		
	(Name of Person)		ode & Daytime Telephone Number)		
Enclosed is a ch	neck 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 FILED FOR A LIMITED LIABILITY COMPANY 2015 OCT 26 PM 3: 28

1.	The name of a limited liability company is		SECRETARY OF STATE TALLAHASSEE, FLORIDA				
	JLFR Boathouse, LLC						
2.	The Articles of Organization were filed on May 10,	,2007	and assigned				
	document number L07000050258						
3.	Note: If the date inserted in this block does not meet the	effective date the dissolution if not effective on the date of filing: 10/15/15 (effective date cannot be prior to or more than 90 days later than date document is received for filing) date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.					
4.	A description of occurrence that resulted in the lim 605.0707, Florida Statutes, (copy 605.0707 on back	nited liability compa	ny's dissolution pursuant to section				
	All assests sold, company dissolved.						
5.	If there are no members, enter the name and address	ss of the person app	ointed to wind up the company's				
	activities and affairs:						
							
		-					
6. lis	Signature of an authorized person or if there are no sted above to wind up the company's activities and a	members, the signation	ature of the person appointed and				
	1.11						
	Just !	Frank P. Ripa					
	Signature		Printed Name				
	FILING	FEE: \$25.00					