# L07000089010

| (Requ                       | uestor's Name  | )            |
|-----------------------------|----------------|--------------|
| (Addr                       | ess)           |              |
| (Addr                       | ess)           |              |
| (City/:                     | State/Zip/Phor | ne #)        |
| PICK-UP                     | ☐ WAIT         | MAIL         |
| (Busi                       | ness Entity Na | ime)         |
| (Docu                       | ıment Numbei   | )            |
| Certified Copies            | Certificate    | es of Status |
| Special Instructions to Fil | ling Officer:  |              |
|                             |                |              |
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|                             |                |              |
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SECRETARY OF STATEMENT AND ANASSEE, FLORE



**EXAMINER** 



### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 7, 2011

MARIA WILLIS HOSPITALITY SERVICES OF BAYONET POINT, L 7210 BEACON WOODS DRIVE HUDSON, FL 34667

SUBJECT: HOSPITALITY SERVICES OF BAYONET POINT, LLC

Ref. Number: L07000089010



We have received your document for HOSPITALITY SERVICES OF BAYONET POINT, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

- You completed the wrong form
- ✓ We are enclosing the proper form(s) with instructions for your convenience.
- / 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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 511A00000632

### **COVER LETTER**

| TO: Registration Section Division of Corporations  |                          |
|--|--------------------------|
| SUBJECT: Hospitality Services of Bryonet Point UC (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:  |                          |
| rease return an correspondence concerning this matter to the following.  |                          |
| Maria Milli  |                          |
| MAria Willis (Name of Person)  |                          |
| Hospitality Services of Bayoner Point  |                          |
| 7210 BEACON Woods Drive (Address)  | TALL                     |
| Address)  Andsol Fl 34667  (City/State and Zip Code)   | JAN -<br>CRETAR<br>AHASS |
| (City/State and Zip Code)  |                          |
| For further information concerning this matter, please call:   | F STAT                   |
| MAVIA Willis at (737) 863-152/ (Name of Person) (Area Code & Daytime Telephone Number)   | ber)                     |
|  |                          |
| Enclosed is a check for the following amount:  |                          |
| \$25.00 Filing Fee Back Certificate of Status S55.00 Filing Fee Back Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee Back Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) | Status &                 |

# 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 1 1 5

|  | AFE AFE  |           |
|--|--|-----------|
| 1. The name of a limited liability company is  | TAR AS   |           |
| Hospitality Services of Br   | AYONET POINT LC  | <u> </u>  |
| 2. The Articles of Organization were filed on  | 130/2007 and assigned document num                                       | iber      |
| L070000 89010  | ALE S  | <u>ند</u> |
|  | /  |           |
| 3. The date the dissolution was approved:  |  |           |
| 4. A description of occurrence that resulted in the lim 608.441, Florida Statutes, (copy 608.441 on back c | nited liability company's dissolution pursuant to section cover letter). |           |
| Hospitality Services of Bayonet Po   | but hos concluded its business .   |           |
| ANS Mus upon written consent of  | E All the gemaining members choose                                       | Ç5        |
| to close the Company - Plus  | se Note Mr. Steve Strawy 15 No long                                      | 100       |
| A member ex-Fredice 1-1-2009   | ;  |           |
| 5. CHECK ONE:  |  |           |
| All debts, obligations and liabilities of the  | limited liability company have been paid or discharged.                  |           |
| OR- Adequate provision has been made for the   | debts, obligations and liabilities pursuant to s. 608.4421.              |           |
| <ol> <li>All remaining property and assets have been distributed rights and interests.</li> </ol>          | buted among its members in accordance with their respect                 | tive      |
| 7. CHECK ONE:  | ·  |           |
| There are no suits pending against the com   | apany in any court.  |           |
| OR- Adequate provision has been made for the entered against it in any pending suit.                       | e satisfaction of any judgment, order or decree which may                | be be     |
|  |  |           |
| Signatures of the members having the same percentage of  | of membership interests necessary to approve the dissoluti               | ion:      |
| Signature  | Printed Name   |           |
| Sulcas   | DAVID COSS   |           |
|  | SHUTO CIOS   |           |
|  |  |           |
|  |  |           |
|  |  |           |
|  |  |           |
|  |  |           |