

Florida Department of State
Division of Corporations
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L08000043643

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DAVIS, SCHNITKER, REEVES & BROWNING, P.A.
Account Number : I1998000057
Phone : (850)973-4186
Fax Number : (850)973-8564

RECEIVED

2024 MAR -8 PM 3:45

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**LLC DISSOLUTION OR WITHDRAWAL
SEASCAPE AT ST. GEORGE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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DEPARTMENT OF STATE
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MAR 11 2024

T. LEMIEUX

COVER LETTER

((H24000092367 3))

TO: Registration Section
Division of Corporations

SUBJECT: SEASCAPE AT ST. GEORGE, 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:

CLAY A. SCHNITKER

(Name of Person)

SEASCAPE AT ST. GEORGE, LLC

(Firm/Company)

1476 NE STATE ROAD 6

(Address)

MADISON, FLORIDA 32340

(City/State and Zip Code)

For further information concerning this matter, please call:

CLAY A. SCHNITKER

(Name of Person)

850

973-4186

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

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1. The name of a limited liability company is
SEASCAPE AT ST. GEORGE, LLC

2. The Articles of Organization were filed on MAY 1, 2008 and assigned
document number L08000043643

3. The delayed effective date the dissolution is 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.

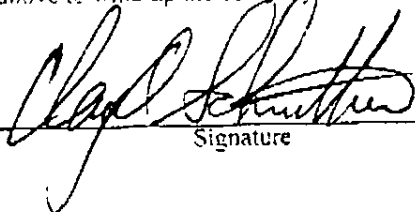
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
Purpose for the limited liability company has expired.

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

1476 NE STATE ROAD 6

MADISON, FLORIDA 32340

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

CLAY A. SCHNITKER

Printed Name

FILING FEE: \$25.00

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