L08000064543

(Requestor's Name)
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11/24/14--01017--002 **25.00

14 NOV 24 PM 2: 36
SECRETARY OF STATE

DEC - 4 2014

T. HAMPTON

COVER LETTER

	(Name of Limite	d Liability Company)
The enclosed	Articles of Dissolution and fee(s) are submitte	ed for filing.
Please return	all correspondence concerning this matter to the	ne following:
	SIGRID HUBER	
	(Name	e of Person)
	PARTSBASE INC.	
	(Firm	/Company)
	905 CLINT MOORE ROAD	
	(A	ddress)
	BOCA RATON, FL 33487	
	(City/State	e and Zip Code)
For further in	formation concerning this matter, please call:	
SIG	GRID HUBER	561 953-0717
	(Name of Person)	(Area Code & Daytime Telephone Number)

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. The name of a limited liabi ULTIMATE WATER FI	• • •
2. The Articles of Organization	n were filed on 07/02/2008 and assigned
document number L08000	0064543
3. The delayed effective date (effective	the dissolution if not effective on the date of filing: 11/24/2014 date cannot be prior to or more than 90 days later than date document is received for filing)
	that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter). WHICH THE COMPANY WAS FORMED DOES NO LONGER
EXIST.	
5. If there are no members, en activities and affairs:	ter the name and address of the person appointed to wind up the company's SIGRID HUBER
	PARTSBASE INC.
a	905 CLINT MOORE ROAD
	BOCA RATON, FL 33487
6. Signature of an authorized listed above to wind up the co	person or if there are no members, the signature of the person appointed and npany's activities and affairs:
	SIGRID HUBER
Signature	Printed Name
	FILING FEE: \$25.00
	SECRE!

Notice of Limited Liability Company Dissolution

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: ULTIMATE WATER FINANCE LLC
Document number of Limited Liability Company is: L08000064543
Date of dissolution was: 12/31/2013 1/24/14
Description of information that must be included in a written claim:
ALL DEBTS, OBLIGATIONS AND LIABILITIES OF THE LIMITED
LIABILITY COMPANY HAVE BEEN PAID OR DISCHARGED.
THE PURPOSE FOR WHICH THE COMPANY WAS FORMED
NO LONGER EXISTS.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
905 CLINT MOORE ROAD
BOCA RATON, FL 33487
86 36 Sept.
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A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is
commenced within 4 years after the filing of this notice.
SIGRID HUBER
Printed Name of the Person Filing Signature of the Person Filing
Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00