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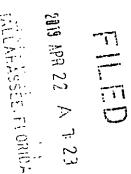
(Rec	questor's Name)			
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(City	y/State/Zip/Phon	e #)		
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
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Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 2, 2019

CATHERINE E HAY 3400 RAVENWOOD LN MIRAMAR BEACH, FL 32550

SUBJECT: CATHERINE E. HAY LIMITED LIABILITY COMPANY

Ref. Number: L11000002398

We have received your document for CATHERINE E. HAY LIMITED LIABILITY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please include description of written claim.

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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 419A00006520

HAVE NO CLAIM?

www.sunbiz.org

COVER LETTER

TO:

Registration Section

Division	of Corporations			
SUBJECT:	CATILINI	UE E. HAY		
	(Name of Limite	ed Liability Company)		
The enclosed Arti-	cles of Dissolution and fee(s) are submitte	ed for filing.		
Please return all co	orrespondence concerning this matter to t	he following:		
-	Don	HAY ie of Person)		
	(.Nam	219		
_	(Firm	n/Company)		
	3400 RAV	TOWED LAND >		
_	(/	Address)		
_	MIRAMAN	Address) BEAUL FU 3753023 te and Zip Code)		
	{City/Stat	e and Zip Code)		
For further inform	nation concerning this matter, please call:			
	(Name of Person)	at (404) 421 - 4143 (Area Code & Daytime Telephone Number)		
Enclosed is a check	for the following amount:			
□ \$25.00 Fi	ling Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
	MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS: Registration Section		

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liab	ility company is				
	CRTHE	RINE	E. HRY	LLC	·
2. The Articles of Organization	on were filed on	JAW	20 6 5_ and as	ssigned	
document number	1100000	2348			,
3. The delayed effective date (effective Note: If the date inserted in listed as the document's effective date. Output Description:	this block does not meet	r more than 90 days is t the applicable stat	iter than date document intory filing requirem	i is received for i	iting)
4. A description of occurrenc 605,0707, Florida Statutes,	(copy 605.0707 on ba	ick cover letter).	, -	•	section
	POPONTIO	B CAL	C. ASSL93): was	2/5
	5060 -			3271 1/2	
				22	maria 148 B American
		1 41		- · >	
5. If there are no members, en	nter the name and addi	ress of the person	appointed to wind	up the compa	my's
activities and affairs:					
	D. A	1. HAY			
	3400	RAUD) WOOD (PNE	
	MIRA	MAR	TSONCIT	T-L	<u>32</u> 552
6. Signature of an authorized listed above to wind up the co	person or if there are ompany's activities and	no members, the d affairs:	signature of the pe	rson appointe	d and
			D.M.	14AY	
N. Monathre			Printed Name		

FILING FEE: \$25.00