

L11000036080

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

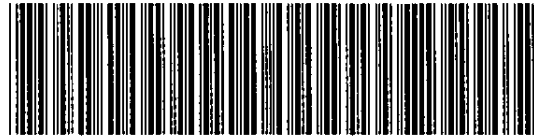
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



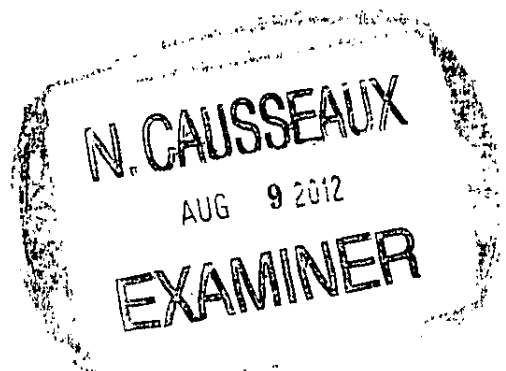
100219532281

L11-36080

08/14/12--01021--013 \*\*73.00

FILED  
1208-1 PM 1:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

25.00



**COVER LETTER**

L11-36080

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Water Bluff Arms LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Douglas A. Tilley Jr.**

Name of Person

**Water Bluff Arms LLC**

Firm/Company

**3780-9 Kori Road**

Address

**Jacksonville Florida 32259**

City/State and Zip Code

**waterbluffarms@gmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Douglas A. Tilley Jr.**

Name of Person

at ( **904** ) **237-7655**  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ **\$25.00 Filing Fee**

☐ **\$30.00 Filing Fee &  
Certificate of Status**

☐ **\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)**

☐ **\$60.00 Filing Fee,  
Certificate of Status &  
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

To: Nanette Lausseau

Please find the enclosed forms, and the \$73.00 check. Also enclosed is the form to have my business address changed back to the previous address. You will find a check for \$25.00 to cover the filing fee.

I would like to thank you for all of your help, and again I apologize for being such a pain.

If anything else is needed please let me know.



Doug Tilley

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Water Bluff Arms LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Revocation of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Douglas A. Tilley Jr.

Name of Person

Water Bluff Arms LLC

Firm/Company

2509 Water Bluff Drive

Address

Jacksonville Florida 32218

City/State and Zip Code

waterbluffarms@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Douglas A. Tilley Jr.

Name of Person

at ( 904 ) 237-7655

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$100 Filing Fee    ☐ \$105 Filing Fee & Certificate of Status    ☐ \$130 Filing Fee & Certified Copy    ☐ \$135 Filing Fee, Certificate of Status & Certified Copy

CR2E097 (8/05)

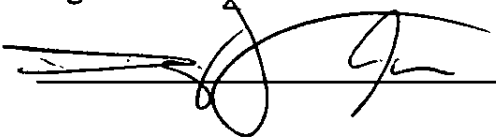
**ARTICLES OF REVOCATION OF DISSOLUTION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

Pursuant to section 608.4411, Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution:

1. The name of the company is Water Bluff Arms LLC.
2. The document number of the company is L11000036080.
3. The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State was  
04/25/2012.
4. The revocation of dissolution was authorized in the same manner as the dissolution on 04/25/2012.

Signatures of the members having the same percentage membership interests necessary to approve the revocation of dissolution:

Signature



Typed or Printed Name

Douglas A. Tilley Jr.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12/17/11 PM 1:34

FILED

**Filing Fee: \$100.00**

History from 07-01-2012 to 07-31-2012

[Printer-Friendly Version](#)**SHARE DRAFT ACCOUNTS 70** [Account Info](#)[How do I sort?](#)

| Date       | Check # | Transaction / Description                         | Credit | Debit  | Balance |
|------------|---------|---|--------|--------|---------|
| 07-02-2012 |         | ACH Withdrawal / JPMorgan Chase -Ext Trnsfr       |        | 483.68 | 21.32   |
| 07-03-2012 |         | ACH Withdrawal / PAI -SETTLEMENT                  |        | 32.40  | -11.08  |
| 07-03-2012 |         | Transfer to Share Draft / Transfer from 90370-00S | 11.08  |        | 0.00    |
| 07-09-2012 |         | Payroll Deduction                                 | 240.00 |        | 240.00  |
| 07-17-2012 |         | Teller Deposit                                    | 208.64 |        | 448.64  |
| 07-23-2012 |         | Payroll Deduction                                 | 240.00 |        | 208.64  |
| 07-27-2012 | 418     | Share Draft / SHARE DRAFT # 418                   |        | 185.00 | 21.64   |

**View Another Date Range**

06 / 16 / 2012 to 06 / 30 / 2012

**View Another Account**

View this date range for: 70; SHARE DRAFT ACCOUNTS ▼

**Quick Export**

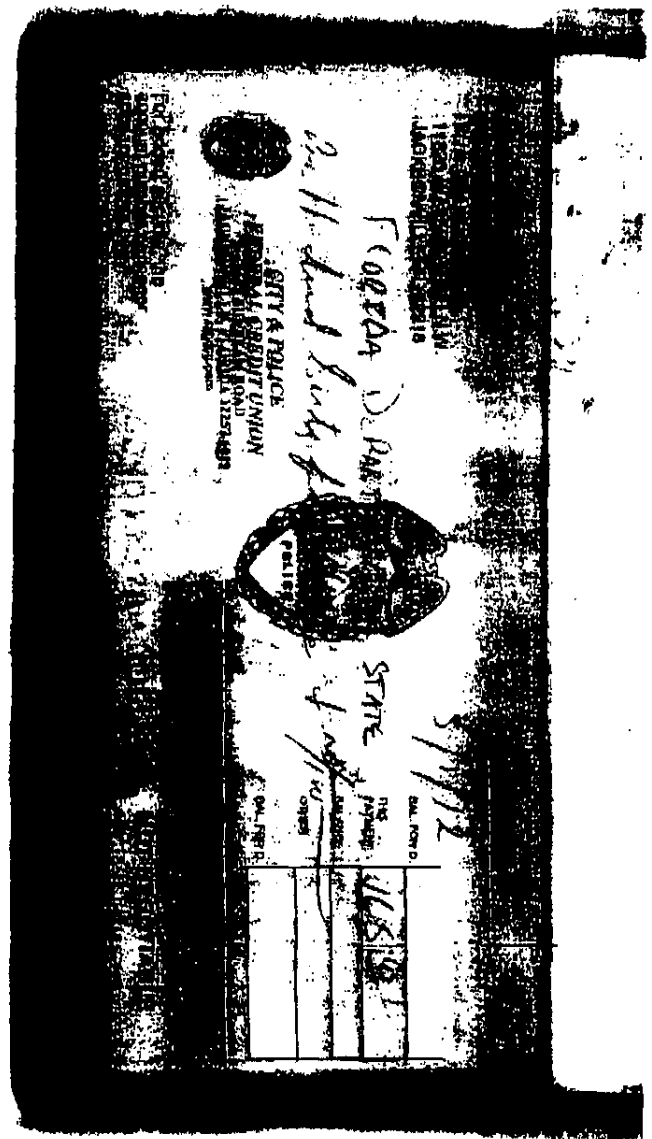
All transactions in the selected date range will be downloaded.

07 / 01 / 2012 to 07 / 31 / 2012

Export this date range to: -- select format -- ▼

P. 02/04

City & Police Federal Credit Union  
 4675 Sunbeam Road, Jacksonville, Florida 32257-6109  
 Phone (904) 353-2240 | WATS (800) 881-2240 | Fax (904) 854-9776 |  
 Secure Email [support@cityfcu.com](mailto:support@cityfcu.com)



JACKSONVILLE PO  
JACKSONVILLE, Florida  
32205-9999  
1143643231-0007  
06/01/2012 (904) 955-8882 04:38:52 PM

| Product Description   | Qty | Unit Price | Final Price   |
|---|-----|------------|---------------|
| TALLAHASSEE FL 32314<br>Zone-2 First-Class<br>Large Env<br>1.50 oz. |     |            | \$1.10        |
| Issue Fee:  |     |            | \$1.10        |
| MARTINSBURG WV 25405<br>Zone-5 First-Class<br>Large Env<br>1.50 oz. |     |            | \$1.10        |
| Issue Fee:  |     |            | \$1.10        |
| <b>Total:</b>   |     |            | <b>\$2.20</b> |

Paid by:  
Debit Card \$2.20  
Account #: XXXXXXXXXXXX0004  
Approval #:   
Transaction #: 268  
22 0000000000  
Receipt #: 000304

\*\*\*\*\*  
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Offices.  
\*\*\*\*\*

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to order stamps online with postage.  
For more information call 1-800-ASK-USPS.

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Class: 17

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