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(Re	equestor's Name)			
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## **COVER LETTER**

TO:

	stration Section sion of Corporations			
UBJECT:	Clown Life Vests, LLC			
(Name of Limited Liability Company)				
ie enclosed	Articles of Dissolution and fee(s) are submi	tted for filing.		
	all correspondence concerning this matter to			
	Laird A. Lile			
	(Na	me of Person)		
	Laird A. Lile, PLLC			
	(Fir	m/Company)		
	3033 Riviera Drive #104			
	·	(Address)		
	Naples, FL 34103			
	(City/St	ate and Zip Code)		
further int	ormation concerning this matter, please call	:		
Laire	d A. Lile	239 at (	649.7778	
	(Name of Person)		ode & Daytime Telephone Number)	
losed is a ch	neck for the following amount:			
<b>■ \$</b> 25.0	0 Filing Fee and Certificate of Dissolution	_	Fee, Certificate of Dissolution & Copy (additional copy is enclosed)	
	ing Address:	Street Address		
Registration Section		Registration Section Division of Corporations		
Division of Corporations P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Moi	nroe Street, Suite 810	
		Tallahassee.	FL 32303	

# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

١.	The name of a limited liability company is  Clown Life Vests, LLC
2.	The Articles of Organization were filed on June 28, 2011 and assigned
	document number <u>1.11000074590</u>
3.	The delayed effective date the dissolution if 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), consent of the sole member
	<del></del>
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	·
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
`	Laird A. Lile
	Signature Printed Name
_	FILING FEE: \$25.00

### Resolution regarding Articles of Dissolution for Clown Life Vests, LLC A Florida Limited Liability Company

Whereas, Clown Life Vests, LLC ("CLV") was formed as a Florida limited liability company effective June 23, 2011 by document number L11000074590;

Whereas, the sole member of CLV from formation through July 1, 2020 was Louis W. Welt, as trustee of Patricia L. Welt Trust dated December 20, 1994 ("Patricia's Trust"):

Whereas, on July 1, 2020. Patricia's Trust was terminated by agreement among the beneficiaries and each beneficiary agreed to receive an interest in the trust property (including the membership interests of CLV) based upon actuarial values, with the result that 2.4592% was to be distributed to Louis W. Welt, Sr., and 32.5136% was to be distributed to each of the trusts for each of Louis W. Welt, Jr. David S. Welt, and Patricia L. Peters as provided for under Patricia's Trust;

Whereas, pursuant to the operating agreement Louis W. Welt, Sr. continued as the only member and the trustees were assignees of the membership interests;

Whereas, Louis W. Welt, Sr. passed away on November 3, 2020;

Whereas, David S. Welt is the personal representative of the Estate of Louis W. Welt, Sr.; and

Whereas, David S. Welt has determined that CLV should be dissolved as of December 31, 2020.

Now, therefore, David S. Welt, as personal representative of the Estate of Louis W. Welt, Sr., hereby authorizes Laird A. Lile to take all administrative steps necessary to dissolve QLV

> David S. Welt, personal representative of the Estate of Louis W. Welt. Sr.