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Office Use Only



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SECRETARY OF STATE TALL AHASSEL FLORIDA

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COVER LETTER

TO:

Registration Section Division of Corporations

Mer-Maids Boat Detailing, 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:

Maureen M. Samson (Name of Person) Mer-Maids Boat Detailing, LLC (Firm/Company) 17426 Jamaica Lane Summerland Key, FL 33042

(City/State and Zip Code)

For further information concerning this matter, please call:

Paul S. Mills, CPA

(Name of Person)

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/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 liability company is Mer-Maids Boat Detailing, LLC				
2.	2. The Articles of Organization were filed on		and as	and assigned	
	document number L110001456	90			
3.	Note: If the date inserted in this	date the dissolution if not effective on the date of filing: 2/28/2019 fective date cannot be prior to or more than 90 days later than date document is received for filing) ed in this block does not meet the applicable statutory filing requirements, this date will not be seffective 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).				
	Ceased doing business the beyginning of 2019				
5.	If there are no members, enter the state of	the name and address of the	person appointed to wind	up the company's	
	activities and affairs:			Ž.o.	
	_			TO HAY	
	_			3 24	
6. lis	Signature of an authorized perssted above to wind up the compa	on or if there are no member ny's activities and affairs:	ers, the signature of the per	rson appointed and	
·\	Winden Samst	<u>Mau</u>	reen M. Samson		
Signature			Printed Name		

FILING FEE: \$25.00