

#/12000029122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

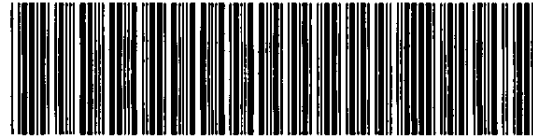
(Business Entity Name)

(Document Number)

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

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03/03/14--01038--030 \*\*25.00

FILED

2014 MAR -3 PM 5:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
MAR.- 5 2014

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 3P School of Kayaking, 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:

Michael S. Lampman

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

2421 Bass Bay Drive

\_\_\_\_\_  
(Address)

Tallahassee, FL 32312

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Lampman

850

2283528

\_\_\_\_\_  
(Name of Person)

at (\_\_\_\_\_) \_\_\_\_\_

(Area Code & Daytime Telephone Number)

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**

**FILED**

**2014 MAR -3 PM 5:45**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

1. The name of a limited liability company is  
3P School of Kayaking LLC

2. The Articles of Organization were filed on 2/29/2013 and assigned  
document number L 12000029122

3. The delayed effective date the dissolution if not effective on the date of filing: \_\_\_\_\_

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).  
Not enough business to continue.

5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Michael Lampman

2421 Bass Bay Drive

Tallahassee, Florida 32312

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed  
above to wind up the company's activities and affairs:

Signature



Printed Name

Michael S. LAMPMAN

**FILING FEE: \$25.00**