L12 0006 8585C

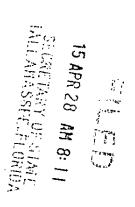
| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nar | ne) |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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04/28/15--01020--016 **25.00



J. Shilvers MAY 05 mm

COVER LETTER

TO:

| TO: | Registration Section Division of Corporations | | |
|----------------------|---|---|--|
| SUBJI | FL AQUATICS DIRECT LLC | | |
| | (Name of Limited | d Liability Comp | any) |
| | | | |
| The en | aclosed Articles of Dissolution and fee(s) are submitte | osed Articles of Dissolution and fee(s) are submitted for filing. | |
| Please | return all correspondence concerning this matter to the | ne following: | |
| | Michael W. Cole | | |
| | (Name | e of Person) | |
| | (Firm | /Company) | |
| | 7231 Westwood Acres Road | , company) | |
| | (A | ddress) | |
| | Fort Myers Florida 33905 | | |
| | (City/State | and Zip Code) | - |
| For fur | rther information concerning this matter, please call | | |
| | Michael Cole | 239 at (| 2871211 |
| | (Name of Person) | (Area (| Code & Daytime Telephone Number) |
| Enclose | ed is a check for the following amount: | | |
| I | | | ing Fee, Certificate of Dissolution & Copy (additional copy is enclosed) |
| | MAILING ADDRESS: | | REET/COURIER ADDRESS: |
| Registration Section | | Registration Section | |
| | Division of Corporations P.O. Box 6327 | | ision of Corporations ton Building |
| | Tallahassee, FL 32314 | | 1 Executive Center Circle |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability company is Florida Aquatics Direct LLC |
|-----------|--|
| 2. | The Articles of Organization were filed on $\frac{6}{39/12}$ and assigned |
| | document number <u>L12000085856</u> |
| 3. | The delayed effective date the dissolution if not effective on the date of filing: APRIL 30, 2015 (effective date cannot be prior to or more than 90 days later than date document is received for 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). |
| | |
| | <u> </u> |
| 5. | If there are no members, enter the name and address of the person appointed to wind up the company |
| | activities and affairs: |
| | |
| | |
| 6. lis | Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs: |
| | Michael W. Cole Signature Printed Name |
| | FILING FEE: \$25.00 |
| | Michael W. Cole |

231 Westwood Acres Road Fort Myers, Florida 33905