

L12000091133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

2014 APR 21 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 23 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PINTA MARINE SERVICES, 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:

THOMAS J. PINTA II

(Name of Person)

PINTA MARINE SERVICES, LLC

(Firm/Company)

P.O. Box 570

(Address)

Lutz, FL 33548

(City/State and Zip Code)

For further information concerning this matter, please call:

THOMAS J. PINTA II

(Name of Person)

at (813) 388-5030

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

1 \$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

PINHA MARINE SERVICES, LLC

2. The Articles of Organization were filed on 13 July 2012 and assigned

document number L 12000091133

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)

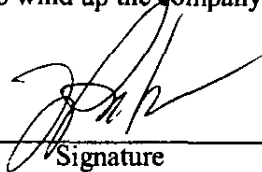
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

UNABLE TO CONDUCT BUSINESS DUE
TO MEDICAL ISSUES

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

THOMAS J. PINHA II
P.O. BOX 570
LUFTZ, FL 33548

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

THOMAS J. PINHA II
Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA