# L12000157752

| (Requestor's Name)                      |  |  |
|---|--|--|
| (Address)                               |  |  |
| (Address)                               |  |  |
| (City/State/Zip/Phone #)                |  |  |
|   |  |  |
| PICK-UP WAIT MAIL                       |  |  |
| (Business Entity Name)                  |  |  |
|   |  |  |
| (Document Number)                       |  |  |
| Certified Copies Certificates of Status |  |  |
|   |  |  |
| Special Instructions to Filing Officer: |  |  |
|   |  |  |
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Office Use Only



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1. Stores 144 L 4 2013

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |  |  |  |
|---|--|--|--|
| SUBJECT: Row Your Boat Productions, 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:  |  |  |  |
| Paulette Reuther (Name of Person)   |  |  |  |
| (Firm/Company)  |  |  |  |
| 807 Willow Road (Address)   |  |  |  |
| Franklin Square NY 11010 (City/State and Zip Code)  |  |  |  |
| For further information concerning this matter, please call:  Paulette Reuther at (646) 369 2009  (Name of Person) (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

| 1. The name of a limited liabil  | ity company is  |                                   |  |
|--|---|-----------------------------------|--|
| Row Your   | Boat Productions, LLC   | ·                                 |  |
|  | obo 15 3392   | _                                 |  |
| 3. The delayed effective date t  | he dissolution if not effective on the date of fil                                    | ing: ASAP                         |  |
| 4. A description of occurrence 605.0707, Florida Statutes, (   | that resulted in the limited liability company's copy 605.0707 on back cover letter). | s dissolution pursuant to section |  |
| Moved out of   | state to New York. N  | a nork in Fronida                 |  |
| any longer.  |   |                                   |  |
| <del></del>  | · · · · · · · · · · · · · · · · · · ·   |                                   |  |
| 5. If there are no members, en activities and affairs:   | er the name and address of the person appoint   |                                   |  |
|  | 807 Willow Rd   |                                   |  |
|  | Fanklin Sq., Ny 110   | ID                                |  |
| 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  | Prin  | Printed Name                      |  |
| mit XI   | Paulette  | Ponther                           |  |
|  | FILING FEE: \$25.00   | TALLAND                           |  |
|  |   |                                   |  |