# L170000 74275

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				

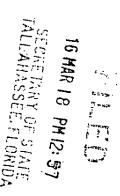
Office Use Only



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MAR 20 2016 J SHIVERS



### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SHR IFCT

Blue Water 704, 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:

# **Allison Dennis**

(Name of Person)

Blue Water 704, LLC

(Firm/Company)

14600 Eagles Lookout Ct.

(Address)

Fort Myers, Florida 33912

(City/State and Zip Code)

For further information concerning this matter, please call:

## **Allison Dennis**

239

322-3605

(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 lis	ability company is		
Blue Water 704, LLC		\ 	
2. The Articles of Organiza	ation were filed on 05/20/2	013	and assigned
document number L1300	00074275	<del></del>	
Note: If the date inserted	ctive date camot de prior to or m	ne applicable statutory fili	ling: 03/18/3016 late document is received for filing) ng requirements, this date will not be
4. A description of occurre 605.0707, Florida Statute	ence that resulted in the limes, (copy 605.0707 on back	nited liability company's cover letter).	s dissolution pursuant to section
Sale of all assets			
5. If there are no members, activities and affairs:	, enter the name and addres	ss of the person appoint	ted to wind up the company's
	14600 Eagles Lookout	Ct.	
	Fort Myers, Florida 33	3912	
			16 SEE IALL
6. Signature of an authorize listed above to wind up the	zed person or if there are no e company's activities and ε	members, the signatur	e of the person appointed and
Meion 1	Judanio	Allison Dennis	8 PMIZ
Sigbatúr	<b>e</b>	Prir	nted Name
`	FILING	FEE: \$25.00	