

L1300000 82053

(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:

Office Use Only



900274071639

06/29/15--01029--012 **25.00

FILED

15 JUN 29 AM 7:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 01 2015

J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vacation Resort Advocates 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:

Aaron Sharpe

(Name of Person)

Sharpe Companies LLC

(Firm/Company)

6188 4th Av S

(Address)

St Petersburg FL 33707

(City/State and Zip Code)

For further information concerning this matter, please call:

Aaron Sharpe

(Name of Person)

at (727) 434-2386

(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 liability company is

Vacation Resort Advocates LLC

2. The Articles of Organization were filed on 6/6/2013 and assigned

document number 113000082053

3. The delayed effective date the dissolution if not effective on the date of filing: 4/1/2015
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Lack of capital

FILED
15 JUN 29 AM 7:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

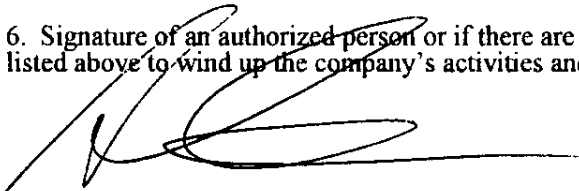
Aaron Sharpe

Sharpe Companies

6188 4th Av S

St Petersburg FL 33707

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

Aaron Sharpe

Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Vacation Resort Advocates

Document number of Limited Liability Company is: 113000082053

Date of dissolution was: 4/1/2015

Description of information that must be included in a written claim:

Original signed account information

Documented verification of original debt with detailed account of all charges and fees

Documentation of when, where and how claim may be settled.

Any other information needed to investigate and verify claim

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Sharpe Companies

C/O Aaron Sharpe

6188 4th Av S

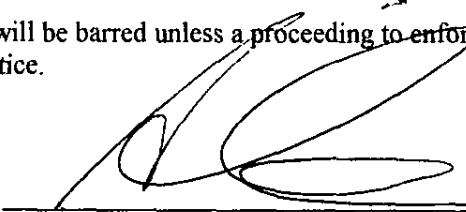
St Petersburg FL 33707

FILED
15 JUN 29 AM 7:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Aaron Sharpe

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00