## 130015073

(Re	questor's Name)	<u> </u>
(Add	dress)	
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(Cit	y/State/Zip/Phone i	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to I	Filing Officer:	

Office Use Only

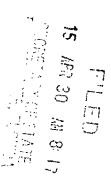


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TO ACKNOWLEDGE SUFFICIENCY OF FILING DIES DESCRIBERANDE NOTSTAND LATES DE LICHTERANDE (CENTRE LA CONTROLLE NOTSTANDEN)

APR 3 0 2015 S. YOUNG



## **COVER LETTER**

TO: Registration Section Division of Corporations

**IBJECT:** Wakulla Oyster Farms, 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:

Steve Cushman	
(Name of Person)	
Wakulla Oyster Farms, LLC	
(Firm/Company)	
233 Clark Dr	
(Address)	
Panacea, Florida 32346	
(City/State and Zin Code)	

For further information concerning this matter, please call:

Steve Cushman

(Name of Person)

at (940) 735-1879 (Area Code & Daytime Telephone Number) (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
	Wakulla Oyster Farms, LLC
2.	The Articles of Organization were filed on and assigned and assigned
	document number L13000115073
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)  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).
	Company closed
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
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6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
7	Sterio Condenses
0	Signature Printed Name

FILING FEE: \$25.00