L14000 116 669

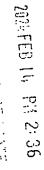
(Requestor's Name)
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<u> </u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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92/14/24--61015--631 ++25.00



COVER LETTER

Tallahassee, FL 32314

	ion Section of Corporations		
SUBJECT:	Rain River Ocean (Name of Limit	ted Liability Company)	
The enclosed Artic	cles of Dissolution and fee(s) are submit	tted for filing.	
Please return all co	orrespondence concerning this matter to	the following:	
_	Linda	Drape	
	(Nau	me of Person)	
_	(Fir	m/Company)	
	1103 32 A	(Address)	DONEER IN PHICE OF
		(Address)	
	Brunswick,	GA 3 15 2 D ate and Zip Code)	
_	(City/Sta	ate and Zip Code)	
For further inform	ation concerning this matter, please call	:	ं सि
	inda DRAPÉ	at (941) 875 40 U	18
	(Name of Person)	(Area Code & Daytime Telephone N	lumber)
Enclosed is a check	for the following amount:		
\$25.00 Fil	ling Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissoluti Certified Copy (additional copy is encl	ion & osed)
_	ation Section n of Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Rain River Ocean LLC.			
2.	The Articles of Organization were filed on $0.7 24 2014$ and assigned			
	document number <u>L14000116669</u>			
3.	The delayed effective date the dissolution if not effective on the date of filing: 2/12/7024 (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).			
	Retiving # A			
	7. 2			
	36 - 18			
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:			
	1103 320 AVE			
	Browswick 6A 31520			
6. ah	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:			
u l	Linda DRAPE			
	// // Signature Printed Name			