## 14000145354

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Document Number)		
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K. SALY EXAMINER JUL 15



July 11, 2016

PAT J. BOMBARD 1800 59TH CIR. SOUTH ST. PETERSBURG, FL 33712

SUBJECT: SUMMER WINDS SARASOTA LLC

Ref. Number: L14000145354

We have received your document for SUMMER WINDS SARASOTA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please enter the correct information on to the document ie .... the proper name of the company and the correct document number. Enclosed is a fresh document and print out with the correct information for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 616A00014412

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: SUMMER WINDS SARASITA 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:

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Summer Winds SARASOTA LLC

(Firm/Company)

1661 Ring Ling BL V D

(Address)

SARASOTA FL. 34236

(Clty/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

(Area Code & Daytime Telephone Number)

**MAILING ADDRESS:** 

\$25.00 Filing Fee and Certificate of Dissolution

Enclosed is a check for the following amount:

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

\$55.00 Filing Fee. Certificate of Dissolution & Certified Copy (additional copy is enclosed)

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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

7/15/2016 15:06 7278642229	THE UPS STORE	PAGE 03
	OF DISSOLUTION FOR ABILITY COMPANY	2016 JUL 14 PM 1: 18
1. The name of a limited liability company is SUMMER WIN	OS SARASOTA	A LACLAHASSEE, FLORIDA
2. The Articles of Organization were filed on  document number L 14 000 / 6		gned SEE, FLORIDA
3. The delayed effective date the dissolution if not (effective date cannot be prior to or Note: If the date inserted in this block does not mee listed as the document's effective date on the Depart	r more than 90 days later than date document is if the applicable statutory filing requirement	received for filing) ts, this date will not be
4. A description of occurrence that resulted in the i 605.0707, Florida Statutes, (copy 605.0707 on banks)	imited liability company's dissolution ack cover letter).	pursuant to section
5. If there are no members, enter the name and add activities and affairs:	ress of the person appointed to wind up	o the company's
6. Signature of an authorized person or if there are listed above to wind up the company's activities and Party Barteurl	no members, the signature of the person d affairs:  PAT BIMBA  Printed Name	•

FILING FEE: \$25.00