

Division of Corporations

Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000147857 3)))



H190001478573ABC9

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : HILL WARD HENDERSON  
Account Number : 072100000520  
Phone : (813) 221-3900  
Fax Number : (813) 200-5995

FILED  
2019 MAY -3 AM 8:52  
TALLAHASSEE, FL

**LLC DISSOLUTION OR WITHDRAWAL  
WLS BAYSHORE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

2019 MAY 03

Electronic Filing Menu Corporate Filing Menu Help

PRAT

((H19000147857 3)))

ARTICLES OF DISSOLUTION  
OF  
WLS BAYSHORE, LLC  
(L14000151416)

---

ARTICLE I

The name of the limited liability company is WLS BAYSHORE, LLC (the "Company").

ARTICLE II

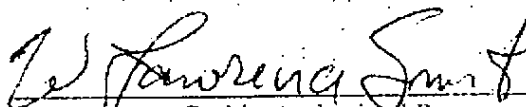
The Articles of Organization was filed on September 29, 2014 and assigned document number L14000151416.

ARTICLE III

The effective date of the Company's dissolution is the date of the filing of these Articles of Dissolution.

WARTICLE IV

The Company is being dissolved pursuant to the Joint Action by Written Consent of the Members and Manager of the Company dated April 30, 2019.

  
W. Lawrence Smith, Authorized Person

FILED  
2019 MAY -3 AM 8:52  
CLERK OF COURT  
STATE OF FLORIDA

((H19000147857 3)))

((H19000147857 3)))

### 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: WLS BAYSHORE, LLC

Document number of Limited Liability Company is: L14000151416

Date of dissolution was: SEE ARTICLES OF DISSOLUTION

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

IF YOU FEEL THAT YOU HAVE A POSSIBLE CLAIM, PLEASE CONTACT IN WRITING THE  
PERSON BELOW WITH A DETAILED DESCRIPTION OF THE NATURE AND AMOUNT OF  
THE ASSERTED CLAIM.

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

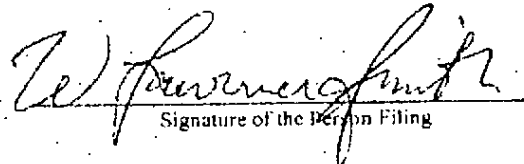
5020 BAYSHORE BOULEVARD, UNIT 305

TAMPA, FL 33611

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.

W. LAWRENCE SMITH

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

((H19000147857 3)))

FILED  
2019 MAY -3 AM 8:52  
TALLAHASSEE, FL