

L15000085637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

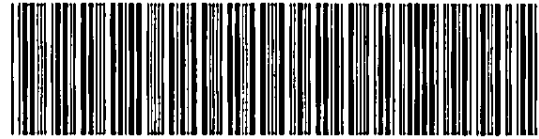
(Document Number)

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notice 115

AUG 04 2020

ALBRITTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sea View 100 Percent LLC

\_\_\_\_\_  
(Name of Limited Liability Company)

Please return all correspondence concerning this matter to the following:

Dinah Robertson

\_\_\_\_\_  
(Name of Person)

Neighborhood Realty Inc.

\_\_\_\_\_  
(Firm/Company)

1102 A1A N Unit 102

\_\_\_\_\_  
(Address)

Ponte Vedra, FL 32082

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Dinah Robertson

904

247-9160

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

## 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: Sea View 100 Percent LLC

Document number of Limited Liability Company is: L15000085637

Date of dissolution was: 11/06/2019

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

A detailed statement of account must show the date, number and amount of all invoices or charges,

together with the date, number and amount of all creditors or payments.

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

C/O Neighborhood Realty

1102 A1A N Ste 102

Ponte Vedra, FL 32082

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.

Dinah Robertson

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**