9/15/25, 10:59 AM Division of Corporations

L25000116094

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From:
Account Name : KOONTZ & ASSOCIATES, PL
Account Number : I20220000183
Phone : (941)225-2615
Fax Number : (941)951-2618

LLC DISSOLUTION OR WITHDRAWAL
BAY MEASUREMENTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	$25.00

RECEIVED
2025 SEP 19 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2025 SEP 19 AM 10:13

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T. LEMIEUX
SEP 22 2025

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAY MEASUREMENTS, 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:

JACQUELINE M. DURHAM, ESQ.
(Name of Person)

KOONTZ & ASSOCIATES, PL
(Firm/Company)

1613 FRUITVILLE RD.
(Address)

SARASOTA, FL 34236
(City/State and Zip Code)

For further information concerning this matter, please call:

JACQUELINE M. DURHAM, ESQ. at (941) 225-2615
(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

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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
   BAY MEASUREMENTS, LLC

2. The Articles of Organization were filed on 07/06/2015 and assigned document number L15000116094

3. The delayed effective date the dissolution if not effective on the date of filing: 09/30/2025
   (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).
   PURSUANT TO THE CONSENT OF ALL MEMBERS.

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5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: 4240 BALMORAL WAY, SARASOTA, FL 34238

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Signed by: Brian R. Callahan

Signature

BRIAN R. CALLAHAN
Printed Name

FILING FEE: $25.00

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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: BAY MEASUREMENTS, LLC

Document number of Limited Liability Company is: L15000116094

Date of dissolution was: 09/30/2025

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

(i) creditor or claimant name, account or vendor number (if applicable); (ii) date of order, transaction, or occurrence resulting in claim; (iii) outstanding balance due to creditor or claimant (including interest and fees, if applicable); (iv) copy of contract or other summary of terms between Company and creditor/claimant; (v) copy of invoice from creditor or claimant for subject claim (if applicable); (vi) contact information for creditor or claimant, including telephone number, email, mailing address and designated manager or officer of creditor with authority to discuss claim.

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

4240 BALMORAL WAY, SARASOTA, FL 34238

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.

BRIAN R. CALLAHAN
Printed Name of the Person Filing

Signed by:
Brian R. Callahan
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately $25.00