

L15000117245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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02/16/17--01015--025 **55.00

FILED
17 FEB 16 AM 7:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O.Box 540234

Lake Worth, Florida 33454-0234

2/13/17

Division of Corporations,

P.O. Box 637, Tallahassee, FL 32314

TO WHOM IT MAY CONCERN.

I am responding to an email I received from this department dated 2/11/17 requesting an annual report for Waves Support Coordination. Since the registration of this company it has never been in operation and as such there is no report. Further there is no contemplation to use it and I wish to dissolve and withdraw the business name from your records. Please find copy of registration attached as this is the only document I have.

I have enclosed a check for \$55.00 for filing fees of certificate of Dissolution and certified copy.

Thank you.

Pamela Blake

A handwritten signature in black ink, appearing to read 'P. Blake', with a stylized flourish at the end.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Waves Support Coordination 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:

Pamela Blake

(Name of Person)

Waves Support Coordination

(Firm/Company)

P.O. Box 540234

(Address)

Lake Worth, FL 33454-0234

(City/State and Zip Code)

For further information concerning this matter, please call:

Pamela Blake

(Name of Person)

at (561) 319-8287

(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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

WAVES SUPPORT COORDINATION LLC

2. The Articles of Organization were filed on July 1, 2015 ^{FB} July 14, 2015 and assigned

document number L15000117245

3. The delayed effective date the dissolution if not effective on the date of filing: July 14, 2015

(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).

Since the registration of this company it has never been in operation and of such I would like to dissolve it.

The only document I have in this company's name is the registration. I will enclosed a copy

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

Pamela Blake

P.O Box 540234 Lake Worth Florida 33454

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TALLAHASSEE, FLORIDA

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:



Signature

Pamela Blake

Printed Name

FILING FEE: \$25.00