## L16000042574

(Requestor's Name)
- (Address)
(Audiess)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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J. HARRIS

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Dirsolution 5	For LLC Requested	
DOCUMENT NUMBER: \_\_\\\		
The enclosed Notice of Limited Liability C	Company Dissolution and fee are submitted for filing.	
Please return all correspondence concerning	•	
Jan Baile	Ontact Person) Menting	
Crescent Beach Renovations, LLC (Firm/Company)		
(Firm/Company)		
159 Cyrus Street (Address)		
(	<b>4.0</b> 55)	
Marco Irland	FL 34145 e and Zip Code)	
(City/State	and Zip Code)	
For further information concerning this matter	er, please call:	
Jaron Bailey	at $(239)$ $(25-3239)$ (Daytime Telephone Number)	
(Name of Contact Persbn)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amoun	t:	
□\$25 Filing Fee & San Filing Fee & Certificate of Status	□ \$55 Filing Fee & □ \$60 Filing Fee, Certified Copy Certificate of Status &  (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment 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	
Crescent Beach	Renovations, LLC
2. The Articles of Organization were filed on	03/01/2016 and assigned
document number L 160000 42574	<u> </u>
3. The delayed effective date the dissolution if not of (effective date cannot be prior to or Note: If the date inserted in this block does not meet listed as the document's effective date on the Department.	effective on the date of filing: 12/31/2016 more than 90 days later than date document is received for filing) t the applicable statutory filing requirements, this date will not be ment of State's records.
	imited liability company's dissa <del>lutio</del> n pursuant to section ck cover letter).
Meeting and Agreement Bu	y Managers To Wind UP
<del>-</del>	sa Activities
5. If there are no members, enter the name and addractivities and affairs:	ress of the person appointed to wind up the company's
	कर खट 1
<del></del>	
	ភូ
6. Signature of an authorized person or if there are slisted above to wind up the company's activities and	no members, the signature of the person appointed and daffairs:
MARA	Jan Bail MERM
Signature	Printed Name

FILING FEE: \$25.00

## Notice of Limited Liability Company Dissolution

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: Crescent Beach Kenowstrons, LCC
Document number of Limited Liability Company is: 41600042574
Date of dissolution was: 12/31/2016
Description of information that must be included in a written claim:
1) Name of chimant
@ Amount of claim
(3) Material War in the last the
Prijest site where claim originated  (5) Date of Adivery and signed proposal for materials/services related to claim
(5) Date of delivery and since proposal for materials/services
related to claim
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
Crescent Beach Claims
Marca Island, FL 34145
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.
Printed Name of the Person Filing  Signature of the Person Filing
Printed Name of the Person Filing Signature of the Person Filing