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(Requestor's Name)

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(City/State/Zip/Phone #)

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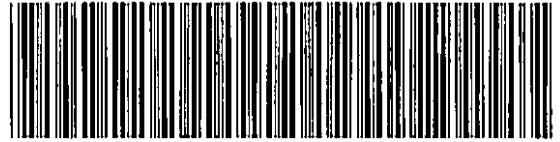
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y. SUMMITT

10/26/2019

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:


FIRST: The name of the limited liability company is: CARVEL YACHT SERVICES, LLC

SECOND: The Florida Document number of the limited liability company is: L16000098335

THIRD: The date of filing of the initial articles of organization is: May 19, 2016

FOURTH: The date of filing of the dissolution is: October 17, 2019

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.


Signature of Authorized Representative

Russell Allen

Typed or printed name of signature

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2019 OCT 28 AM 11:42
CLERK OF COURT
TALLAHASSEE, FLORIDA

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