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(Re	questor's Name)				
(Address)					
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		MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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Office Use Only



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 23, 2017

T

MARTHA NIEMES 679 RACQUET CLUB RD #2 **WESTON, FL 33326**

SUBJECT: CAMELOT SPIRITUAL RETREATS LLC Ref. Number: L16000121712

We have received your document for CAMELOT SPIRITUAL RETREATS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers Regulatory Specialist II Supervisor Registration/Qualification Section

Letter Number: 917A00015974

JEAN Kn. JUSTIN

FE ATTACHED

Re-SEN)

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Hohi DA



COVER LETTER

TO: Registration Section Division of Corporations

CAMELOT SPIRITUAL RETREATS LAC SUBJECT:

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAMELOT SPIAITUAL (Firm/Company) LLC KETREATS BACQUET (LUB RD #2 av FL 33326(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (954) 350 -11/6 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee. Certificate of Status & 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

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1. The name of a limited liability company is CAMELOT SPINITUP CRETAENTS LCC	
2. The Articles of Organization were filed on $\frac{6/24/16}{24/16}$ and assigned	·
document number <u>[16000/3/7/2</u>	,
3. The delayed effective date the dissolution if not effective on the date of filing: <u>730</u> (effective date cannot be prior to or more than 90 days later than date document is receive <u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this 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 pursus 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). NOT ENOLYH (ASH TO SUSTAIN THE Result of the second se	ant to section
BUSINGSS Neen & Work	
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5. If there are no members, enter the name and address of the person appointed to wind up the extra trivities and affairs: $\sqrt{20072/2000} N_{1} = 17 + 500000000000000000000000000000000000$	
679 Racquat Churs RD 7	#2
WESTON FL 33326	

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:

an AN EMES 10 Signature

FILING FEE: \$25.00