## 116000124887

	(Requestor's Name)	
<u></u>	(Address)	<del>-,.</del>
	(Address)	
	(City/State/Zip/Phone #)	
PiCK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of (	Status
Special Instruction	s to Filing Officer:	
		,
	Umils	

Office Use Only



700435408827

08/28/24--01018--015 \*\*25.00

## **COVER LETTER**

Division of Corporations		
SUBJECT: OCEANS3	ILLC	
	ed Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submit	ted for filing.	
Please return all correspondence concerning this matter to	the following:	
Jill Al	nn WUMMER	
(Nar	ne of Person)	
DCl	'ANS31	
_	n/Company)	
160 hivi	ERA DRIVE Address)  OCH, FL 33404	
	Address)	
KIVIERA BEA	10H, FZ 33404	
(City/Sta	te and Zip Code)	
For further information concerning this matter, please call:		
Sill A. WUMMER	at (561) 371-1947	
(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:	Sanona Addunan	
Registration Section	Street Address: Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

١,	The name of a limited liability company is SCEANS31
2.	The Articles of Organization were filed on $06/29/2016$ and assigned
	document number <u>L/6000124882</u>
3.	The delayed effective date the dissolution if not effective on the date of filing:
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).  NO SALES WORTHY, RECONSTRUCT: Change Inventory  FORMAT to A NEW Company—
•	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	Jill A. Wummer 160 Riviera Dr
	160 Riviera Dr
	Riviera Beach, FL 33404
6. ube	Signature of an authorized person or if there are no members, the signature of the person appointed and listed we to wind up the company's activities and affairs:
< 	Jill Ann Wummer
	Signature Printed Name FILING FEE: \$25.00