

16000222428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

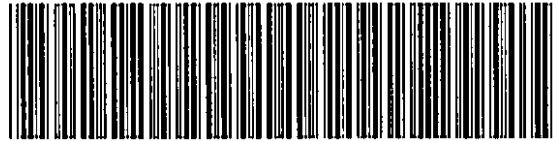
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100315866791

07/23/18--01007--027 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 JUL 23 AM 8:45

FILED

115
672818

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bleu Palms Acquisitions 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:

Kyle Watters

(Name of Person)

Bleu Palms Acquisitions LLC

(Firm/Company)

804 N Olive Ave

(Address)

West Palm Beach, Fl. 33401

(City/State and Zip Code)

For further information concerning this matter, please call:

kyle watters

(Name of Person)

at (561) 632-8960

(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
Bleu Palms Acquisitions LLC

2. The Articles of Organization were filed on December 8th, 2016 and assigned
document number L16000222428

3. The delayed effective date the dissolution if not effective on the date of filing: 07/01/2018
(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).
No active business and have completed the partnership

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

7579 Cedar Hurst Court, Lake Worth, FL 33467

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

Kyle WATTENS
Printed Name

FILING FEE: \$25.00

2016 JUL 23 AM 3:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED