

L16000231652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

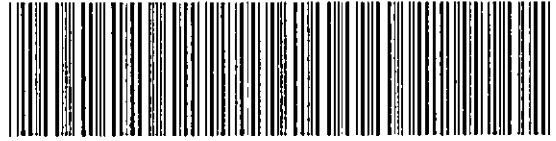
Certified Copies ✓

Certificates of Status 1

Special Instructions to Filing Officer:

W/X \$55.00

Office Use Only



600348880696

S. TALLER

JUL 27 2020

2020 JUL 24 PM 12:30

2020 JUL 24 PM 12:28

V/D

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 7/24/2020

PRIORITY Routine

OUR REF # (Order ID#) 842101

ORDER ENTITY
BLUE LAGOON AVIATION, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

BLUE LAGOON AVIATION, LLC (FL)

File the attached dissolution document and provide a certified copy as evidence.

NOTES:

\$55.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Blue Lagoon Aviation, LLC

2. The Articles of Organization were filed on December 23, 2016 and assigned

document number L16000231652

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

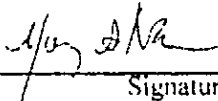
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

The consent of the sole member.

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

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

Blue Lagoon Advisors, LLC, by Young Nam
Printed Name

FILING FEE: \$25.00

2020 JUL 24 PM 12:30