

L17000000900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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STATE OF TEXAS
COUNTY OF DALLAS

Termination

JUN 06 2024

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations
SEASCAPE ACADEMY LLC

SUBJECT: _____
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KAMA LEE CANNON

Name of Person
SEASCAPE ACADEMY LLC

Firm/Company
PO BOX 420194

Address
SUMMERLAND KEY, FL 33042

City/State and Zip Code
KAMALEECANNON@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KAMA LEE CANNON 305 998-9310

Name of Person at () Area Code Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

2024 MAY 20 AM 11:23

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 2, 2024

KAMA LEE CANNON
SEASCAPE ACADEMY LLC
PO BOX 420194
SUMMERLAND KEY, FL 33042

SUBJECT: SEASCAPE ACADEMY LLC
Ref. Number: L17000000900

We have received your document for SEASCAPE ACADEMY LLC and your check(s) totaling \$25.00. However, the document has not been filed and is being retained in this office for the following:

A Statement of Termination may be filed after the limited liability company has completed winding up and after a voluntary dissolution has been filed with this office. See section 605.0709(7), Florida Statutes for reference.

Please return 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) 245-6050.

Diane Cushing
Operations Manager A

Letter Number: 824A00009499

STATEMENT OF TERMINATION

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

SEASCAPE ACADEMY LLC

FIRST: The name of the limited liability company is: _____

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

L17000000900

THIRD: The date of filing of the initial articles of organization is: _____

30 DECEMBER 2016

FOURTH: The date of filing of the dissolution is: _____

13 MARCH 2024

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

Kama Lee Cannon

Signature of Authorized Representative

KAMA LEE CANNON

Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

SECRETARY OF STATE
TALLAHASSEE, FL

2024 MAY 20 AM 11:24

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