

L17000007230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

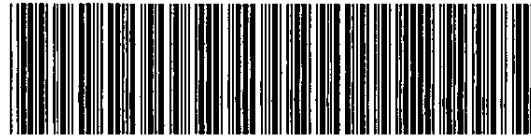
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT
MAR 31 2017

Business Law Center of the Palm Beaches

Gardens Professional Center
9121 North Military Trail | Suite 107 | Palm Beach Gardens | Florida 33410
Telephone 561.630.4800 | Facsimile 561.296.4848
BusinessAttorneyPalmBeach.com

Jay E. Eckhaus

jeckhaus@BusinessAttorneyPalmBeach.com
Member: Florida - New York - Ohio Bars

March 21, 2017

VIA Priority Mail

Registration Section
Division of Corporations
2661 Executive Center Circle
Clifton Building
Tallahassee, FL 32301

Re: Seniortime LLC – Document No. L17000007230

Dear Sir or Madam:

Please find attached the Articles of Dissolution for the above referenced limited liability company together with a check for the \$25 filing fee.

Thank you.

Sincerely,


JAY E. ECKHAUS

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TALLAHASSEE, FLORIDA

Enclosure:

Articles of Dissolution
Check No. B175682

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

1. The name of a limited liability company is

SENIORTIME LLC

2. The Articles of Organization were filed on 01/09/2017 and assigned

document number L17000007230

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).

Decision not to proceed with Business

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

Peter Tracy

4201 N. Ocean Blvd

Boca Raton, FL 33431

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TALLAHASSEE, FLORIDA

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

Peter Tracy

Printed Name

FILING FEE: \$25.00