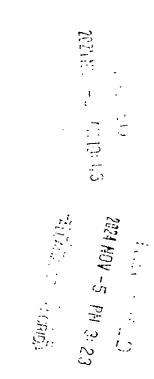
## L17000122454

| (Requestor's Name)                      |
|---|
|   |
|   |
| (Address)                               |
|   |
| (Address)                               |
| ( 100, 100)                             |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Dispense Fath, Nama)                   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
|   |
| Certified Copies Certificates of Status |
|   |
|   |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
| ,                                       |
| · 402                                   |
| NOi RNA                                 |
| 6 3                                     |
| NOV HORNE                               |
| ,                                       |





800439048488



CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 11/05/24 Order #: 1672016-5 Re: Seascape Owner LLC

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Dissolution/Cancellation/Termination
Amount to be deducted from our State Account: \$25.0 - FL State Account Number: 120000000195

December

Please take the following action: File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## **COVER LETTER**

| TO:   | Registration Section Division of Corporations           |   |  |  |  |  |
|---|---|---|--|--|--|--|
| SUBJI   |   |   |  |  |  |  |
| (Name of Limited Liability Company)   |   |   |  |  |  |  |
|   |   |   |  |  |  |  |
| The en  | closed Articles of Dissolution and fee(s) are submitte  | d for filing.   |  |  |  |  |
| Please  | return all correspondence concerning this matter to the | ne following:   |  |  |  |  |
|   | Robyn Tuerk, Esq.                                       |   |  |  |  |  |
|   | (Name   | of Person)  |  |  |  |  |
|   | Philips International                                   |   |  |  |  |  |
|   | (Firm/Company)  |   |  |  |  |  |
|   | 40 Cutter Mill Rd., Suite 405                           |   |  |  |  |  |
|   | (Address)   |   |  |  |  |  |
|   | Great Neck, NY 11021                                    |   |  |  |  |  |
|   | (City/State   | and Zip Code)   |  |  |  |  |
| For fur   | ther information concerning this matter, please call:   |   |  |  |  |  |
|   | Robyn Tuerk, Esq.                                       | 212 951-3801  |  |  |  |  |
|   | (Name of Person)  | (Area Code & Daytime Telephone Number)  |  |  |  |  |
| Enclose   | ed is a check for the following amount:                 |   |  |  |  |  |
| <b>■ \$25.00</b> Filing Fee and Certificate of Dissolution                        |   | ☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed) |  |  |  |  |
|   | Mailing Address:  | Street Address:   |  |  |  |  |
| Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |   | Registration Section  |  |  |  |  |
|   |   | Division of Corporations  |  |  |  |  |
|   |   | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810                                      |  |  |  |  |
|   |   | Tallahassee, FL 32303   |  |  |  |  |

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

|   | ARTICLES OF DISSOLUTION  | 2624                         | 11/10:43 |  |  |
|---|--|------------------------------|----------|--|--|
|   | FOR<br>A LIMITED LIABILITY COMPANY   | T Green                      | 1 / 1/2  |  |  |
| 1.  | . The name of a limited liability company is  Seascape Owner LLC   |                              | 102:43   |  |  |
| 2.  | The Articles of Organization were filed on 6/6/2017 and assigned   |                              |          |  |  |
|   | document number L17000122454   |                              |          |  |  |
| 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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this day listed as the document's effective date on the Department of State's records. | or filing)<br>te will not be |          |  |  |
| 4.  | A description of occurrence that resulted in the limited liability company's dissolution pursuant 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).  | to section                   |          |  |  |
| An event or circumstance that the operating agreement states causes dissolution |  |                              |          |  |  |
|   | An event or circumstance that the operating agreement states causes dissolution  An event or circumstance that the operating agreement states causes dissolution   |                              |          |  |  |
| 5.  | If there are no members, enter the name and address of the person appointed to wind up the compactivities and affairs:  Robyn Tuerk, Esq., Philips International   | pany's                       |          |  |  |
|   | 40 Cutter Mill Rd., Suite 405  |                              |          |  |  |
|   | Great Neck, NY 11021   |                              |          |  |  |
| 6.<br>ab  | Signature of an authorized person or if there are no members, the signature of the person appoint pove to wind up the company's activities and affairs:  | ed and listed                |          |  |  |
| <u>S</u>  | Abyn Tuerk   | <u>-</u>                     |          |  |  |
| •   | () Signature Printed Name  |                              |          |  |  |

FILING FEE: \$25.00