

L17000 142117

(Requestor's Name)

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☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ☒

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JAN 22 2019

FILED
19 JAN 11 PM 1:01
JAN 11 2019

V/DSS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ISLAND CARE, 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:

FRANCIS WALSH

(Name of Person)

ISLAND CARE, LLC

(Firm/Company)

1515 PINELLAS BAYWAY S

(Address)

TIERRA VERDE FL 33715

(City/State and Zip Code)

For further information concerning this matter, please call:

FRANCIS WALSH

(Name of Person)

at 727 289-6525

(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

ISLAND CARE LLC

2. The Articles of Organization were filed on JUNE 30, 2017 and assigned

document number L17000142117

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).

RELOCATING TO ANOTHER STATE

FILED
19 JAN 14 PM 1:41
CLERK OF THE COURT
JAN 14 2019

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

CYNTHIA WALSH

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

FRANCIS WALSH

Printed Name

FILING FEE: \$25.00