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(Requestor's Name)					
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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Boats on a Budget 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:

Rachel Hoopes	
	(Name of Person)
Boats on a Budg	get LLC
	(Firm/Company)
2931 Styles Rd	•
-	(Address)
Alva, FL 33920	
(C	ity/State and Zip Code)

For further information concerning this matter, please call:

Rachel Hoopes at 239 910-8891 (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

۱.	The name of a limited liabil	ity company is		19 <u>7</u> 0
	Boats on a Budget LLC			746
	The Articles of Organization	n were filed on 12/5/17	and assigne	ed ?
	document number L170002	48715	_	3
j.	The delayed effective date (effective) Note: If the date inserted in listed as the document's effective date.	date cannot be prior to or mor his block does not meet the	applicable statutory filing requirements, t	eived for filing) his date will not b
٠.	A description of occurrence 605.0707, Florida Statutes,	that resulted in the limit copy 605.0707 on back of	ed liability company's dissolution pur cover letter).	suant to section
	Voluntary Dissolution due to	inability to maintain fina	ncial viability	
5.	If there are no members, en activities and affairs:	ter the name and address Rachel Hoopes	of the person appointed to wind up th	e company's
		Boats on a Budget LLC	· · · · · · · · · · · · · · · · · · ·	
		2931 Styles Rd		<u> </u>
		Alva, FL 33920		
ś. is	Signature of an authorized sted above to wind up the co	person or if there are no mpany's activities and af	nembers, the signature of the person a	appointed and
/	Pachel Asop	er)	Rachel Hoopes	
	1 Signature ^D		Printed Name	

FILING FEE: \$25.00