

L18000144031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

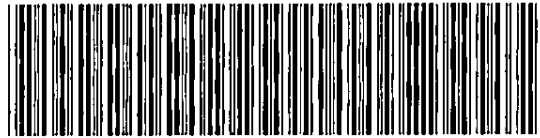
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200402188592

02/13/20--01016--003 **25.00

FILED
2004 FEB 13 PM 4:10
CLERK OF DISTRICT COURT
STATE OF FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LATIN SEAS CRUISE LINE, 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:

JAMES W. DRESE
(Name of Person)

DRESE PALM BEACH
(Firm/Company)

6231 PDA BLVD - 104-430
(Address)

PALM BEACH GARDENS, FL 33418
(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES W. DRESE at (561) 315-5445
(Name of Person) (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 Address:

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

FILED

2023 FEB 13 PM 4:10

1. The name of a limited liability company is

LATINSEAS CRUISE LINE, LLC DE STATE
TALLAHASSEE, FL

2. The Articles of Organization were filed on 6/12/2018 and assigned

document number L18000144031

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).

PRIMARY OWNER RETIRED
FROM 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:

JAMES W. DRESE

6231 PGA BLVD.

SUITE 104-430

PALM BEACH GARDENS, FL 33418

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:

James W. Drese
Signature

JAMES W. DRESE
Printed Name

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: HATIN SEAS CRUISE LINE, LLC

Document number of Limited Liability Company is: H/8000144031

Date of dissolution was: 2/6/2023

Description of information that must be included in a written claim:

COMPLETE DETAILS OF CLAIM

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

HATIN SEAS CRUISE LINE, LLC
6231 PGA BLVD-104-430
PALM BEACH GARDENS, FL 33418

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

JAMES W. DRESE
Printed Name of the Person Filing

[Signature]
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

FILED
2023 FEB 13 PM 4:10
DIVISION OF STATE
CORPORATIONS
FL