

1190000002267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

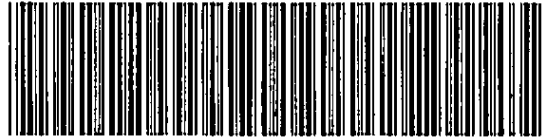
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 MAR 24 10:09
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LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EMERALD SKYE 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:

BARBARA M. HERMAN

(Name of Person)

EMERALD SKYE LLC

(Firm/Company)

778 SCENIC GULF DRIVE, UNIT B416

(Address)

MIRAMAR BEACH, FLORIDA 32550

(City/State and Zip Code)

For further information concerning this matter, please call:

BARBARA M. HERMAN

419

779-1430

at ()

(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**

1. The name of a limited liability company is

EMERALD SKYE LLC

2. The Articles of Organization were filed on 12/28/2018 and assigned

document number L19000002267

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).

Business efforts were unsuccessful.

Business efforts were unsuccessful.

Business efforts were unsuccessful.

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

Barbara M. Herman

778 Scenic Gulf Dr. Unit B416

Miramar Beach, FL 32550

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:

Barbara M. Herman
Signature

Barbara M. Herman
Printed Name

FILING FEE: \$25.00