

L19000124732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

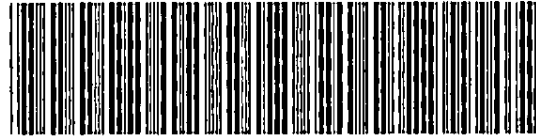
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/02/21--01017--027 \*\*25.00

FILED  
2021 APR -2 AM 11:46  
TALLAHASSEE, FL

D. BRUCE  
MAY 23 2021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Boat Docktor 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:

Joshua Ray

\_\_\_\_\_  
(Name of Person)

Ray CPA PC

\_\_\_\_\_  
(Firm/Company)

3000 Joe DiMaggio Blvd #91

\_\_\_\_\_  
(Address)

Round Rock, TX 78665

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joshua Ray CPA

512

7862052

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

FILED  
2021 APR -2 AM 11:45  
TALLAHASSEE, FL

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

BOAT DOCKTOR LLC

2. The Articles of Organization were filed on 05/08/2019 and assigned

document number L19000124732

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).

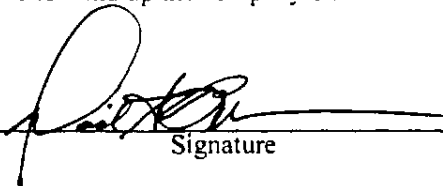
A voluntary decision to wind up the entity.

A voluntary decision to wind up the entity.

A voluntary decision to wind up the entity.

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

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

DAVID BARKER  
Printed Name

**FILING FEE: \$25.00**

FILED  
2021 MAY -2 PM 11:15