

6210666 41944

(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



700402799557

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Lichtenthal and Whistler (1973). The total chlorophyll content was determined by the method of Arar and Cook (1980).

2023 MAY 30 AM 10:32

14 SEP 1961





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 13, 2023

GRIFFIN MARK LEIGHTON  
1886 SECLUSION DRIVE  
PORT ORANGE, FL 32128

SUBJECT: SKYPRO AVIATION LLC  
Ref. Number: L21000041944

We have received your document for SKYPRO AVIATION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

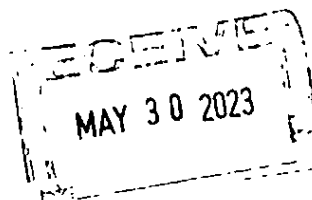
Tammi Cline  
Regulatory Specialist II Supervisor

Letter Number: 023A00010944

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*✓ - Completed and Attached!  
Thank You!*



## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Skypro Aviation 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:

Griffin Marie Leighton  
(Name of Person)

Skypro Aviation LLC  
(Firm/Company)

1886 Seclusion Drive  
(Address)

Port Orange, FL 32128  
(City/State and Zip Code)

TALLAHASSEE, FL

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For further information concerning this matter, please call:

Griffin Leighton  
(Name of Person)

at ( 207 ) 650-2948  
(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)

Previously Paid

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

Sky Pro Aviation LLC

2. The Articles of Organization were filed on 1/21/21 and assigned

document number L2100004944

3. The delayed effective date the dissolution if not effective on the date of filing: 3/1/23  
(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).

Both members agreed to close the LLC  
due to a lack of business.

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TALLAHASSEE, FL

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

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

Griffin Mark Leighton

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: SkipPro Aviation LLC

Document number of Limited Liability Company is: L21000041944

Date of dissolution was: 3/1/23

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

Both members decided to close the LLC due to  
a lack of business.

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

1866 Seclusion Drive  
Port Orange, FL 32128

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.

Griffith Marie Leighton  
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

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2023 MAY 30 AM 10:33  
CLERK OF CIRCUIT COURT  
HALL COUNTY, FLORIDA