L22000294475

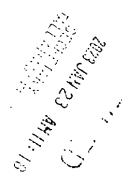
(Reques	tor's Name)
(Address	;)
(Address	s)
(City/Sta	te/Zip/Phone #)
PICK-UP] WAIT MAIL
(Busines	ss Entity Name)
(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer: J. HORNE MAR 2 y 2003





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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Dissolution of Omni Marine Services Inc.
DOCUMENT NUMBER: L22000294475
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Charles Marshall
(Name of Contact Person)
Omni Marine Services LLC
(Firm/Company)
4337 Savannah Bay Place
(Address)
Jupiter Fl. 33458
(City/State and Zip Code)
For further information concerning this matter, please call:
Charles Marshall at () 213-8039
(Name of Contact Person) (Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION



Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: Omni Marine Services LLC
SECOND:	The document number of the corporation (if known):
THIRD:	The file date of the articles of incorporation: June 29, 2022
FOURTH:	None of the corporation's shares have been issued.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up, if any, have been distributed to the shareholders, if shares were issued.
SEVENTH	A majority of the incorporators or directors authorized the dissolution.
o:	
Sigi	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	Charles Marshall
	(Typed or printed name of person signing)
	President
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

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

Name of Corporation:
The above named corporation is the subject of dissolution and the effective date of a dissolution is: 1/1/2023
(date filed with the Dept. if date specified in the Articles of Dissolution)
Description of information that must be included in a claim:
Date and type of work provided
Name of person providing service
Check number used to pay for sevice
Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations)
4337 Savannah Bay Place, Jupiter Florida, 33458

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