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SECRETARY OF STATE VISION OF CORPORATIONS 18 JUN 20 PM 3: 22

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## COVER LETTER

TO: **Registration Section Division of Corporations** 

COASTAL BREEZE HOMES, LLC Name of Limited Liability Company SUBJECT:

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GREG SCHMIDT

Firm/Company 3769 PLEASANT SPRINGS DR. Address NAPLES, FL 34119 City/State and Zip Code GREGSCHMIDT 57@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GREGSCHMIDTat (239)287-6112Name of PersonArea CodeDaytime Telephone Number

## STREET/COURIER ADDRESS:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

**Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

MAILING ADDRESS:

CR2E141 (2/14)

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## STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is:\_\_\_\_\_

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COASTAL BREEZE HOMES, LLC

SECOND: The Florida Document number of the limited liability company is: <u>L0200001358</u>5

THIRD: The date of filing of the initial articles of organization is: JUNE 4, 2002

FOURTH: The date of filing of the dissolution is: \_\_\_\_\_\_UNE 11, 2018\_\_\_\_\_

**FIFTH:** This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

GREG SCHMIDT

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Signature of Authorized Representative

Typed or printed name of signature

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E141 (2/14)