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(Address)			
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(City/Stat	te/Zip/Phone #)			
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J. LEGGETT MAR 1 4 2018

COVER LETTER

TO:

Registration Section
Division of Corporations

Beautiful Views, SouthEast, 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:

Karl Almond		
	(Name of Person)	
	(Firm/Company)	
615 Bark St		
	(Address)	
Swansea, MA	02777	
	(City/State and Zin Code)	

For further information concerning this matter, please call:

Karl Almond

...774

319-3331

(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/COURIER ADDRESS:

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability	company is				
	Beautiful Views, SouthEast, LLC					
2.	The Articles of Organization w	/ere filed on 4/24/200	04	and assigned		
	document number L040000317	84				
3.	The delayed effective date the (effective dat Note: If the date inserted in this listed as the document's effective	e cannot be prior to or m block does not meet th	ore than 90 days later than ne applicable statutory fi	date document is received for fil	ling) ill not b	
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).					
	Ceased business operations in December of 2009. Continued to maintain corporate identity to wind up business p					
5.	If there are no members, enter activities and affairs:	the name and addres	ss of the person appoi	nted to wind up the compar	ny's	
					13. 14.2	
	-			0 0 0 0 0 0 0		
	_			<u> </u>	; —_;;	
6. lis	Signature of an authorized per ted above to wind up the compa	son or if there are no any's activities and a	members, the signatuffairs:	are of the person appointed	and	
×	well ade		Karl D. Almond			
•	Signature	• —	Pı	inted Name		

FILING FEE: \$25.00