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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: COBSIEST ONE TEQUESTA, LLC (Name of Limited Liability Company)
(Name of Diffice Diability Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
STEFAN LEVINE
(Name of Person)
19800 SANOPANTE BAY DR HORIES STATE OF
(Address) TEQUESTA, FL 33469 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
STEFAN LEVIM at (TG1) 632 7705 (Name of Person) at (Area Code & Daytime Téléphone Nümber)
(Name of Person) (Area Code & Daytime Téléphone Nümber)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{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

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