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(Requestor's Name)			
(Ad	dress)		
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(Address)			
(Cit	ty/State/Zip/Phone	e #)	
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PICK-UP	MAIT	MAIL.	
	— ····		
(Business Entity Name)			
(Document Number)			
(20	cament Namber)		
Certified Copies	_ Certificates	s of Status	
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Special Instructions to	Filing Officer:		
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Office Use Only



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THE HARY OF STATE

MAR 3 0 2016

S MASON

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Blue Shore Olds Marke of Limited L	LLC iability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted f	or filing.			
Please return all correspondence concerning this matter to the following:				
Dale Alexander (Name of Person)				
Blue Shore Oldsmar (Firm/Company)				
(Firm/Company)				
180 hake prive, unit 2202				
Palm Beach Shores, FC 33404 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Dale Alexander (Name of Person)	at (813) 767-7701 (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:	STREET/COURIER ADDRESS:			
Registration Section Registration Section Division of Corporations Division of Corporations				

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liab	ility company is	
Bluc	shore Oldsmar, LLC	
2. The Articles of Organization	on were filed on $3/5/07$	and assigned
document number	5000064247	
(effective Note: If the date inserted in	the dissolution if not effective on the date of fe date cannot be prior to or more than 90 days later than this block does not meet the applicable statutory fictive date on the Department of State's records.	date document is received for filing)
605.0707, Florida Statutes,	e that resulted in the limited liability company (copy 605.0707 on back cover letter).	's dissolution pursuant to section
	for husiness	to the second se
5. If there are no members, er activities and affairs:	nter the name and address of the person appoint	nted to wind up the company's
	180 Lake Pr. un: + 22	02
	Palm Beach Shores, F	L 33404
Signature of an authorized listed above to wind up the co	person or if there are no members, the signatum pany's activities and affairs:	re of the person appointed and
	Dale.	Alex an dev
Signature 6	Pri	inted Name
	FILING FEE: \$25.00	MAR 29 A
		F STA F LOF