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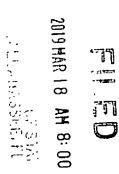
(Rec	questor's Name)				
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PICK-UP	WAIT	MAIL			
(Business Entity Name)					
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COVER LETTER

TO:

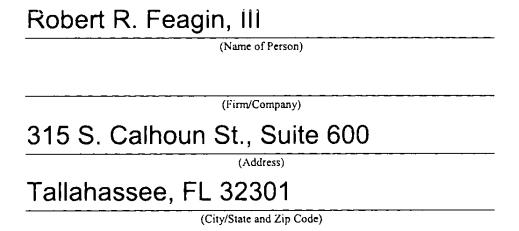
Registration Section Division of Corporations

Cape San Blas Holdings I, 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:



For further information concerning this matter, please call:

Robert R. Feagin, III

(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

FILED

1.	The name of a limited lial	oility company is		2019 MAR 18 AM 8: 00		
	Cape San Blas Holdings I, I	LC				
2.	The Articles of Organizat	ion were filed on Febr	uary 21, 2008	and assigned ARASSEE, FL		
	document number L08000	018581				
3.	(effection of the late inserted in the late inserted in the late inserted in the late inserted in the late in the	e the dissolution if not effective on the date of filing: ive date cannot be prior to or more than 90 days later than date document is received for filing) in this block does not meet the applicable statutory filing requirements, this date will not be fective date on the Department of State's records.				
4.	A description of occurren 605.0707, Florida Statutes	ce that resulted in the large, (copy 605.0707 on be	limited liability company ack cover letter).	's dissolution pursuant to section		
	The properties that were the	sole assets of this LLC h	ave been sold.			
5.	If there are no members, e			ited to wind up the company's		
	activities and affairs:	Robert R. Feagin, II	<u> </u>			
		315 S. Calhoun St., Suite 600				
		Tallahassee, FL 323	01			
6. lis	Signature of an authorized above to wind up the c	d person or if there are ompany's activities an	no members, the signature affairs:	re of the person appointed and		
			Robert R. Feagin, III			
	Signature	6	Pri	nted Name		
		FILIN	NG FEE: \$25.00			