

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



700335850207

10/24/19--01013--007 **25.00



COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

BEST OCEAN INVESTMENTS 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:

ANGEL D CORDOVA

(Name of Person)

ANGEL D CORDOVA & CO.

(Firm/Company)

780 NW 42nd AVENUE-STE.325

(Address)

MIAMI, FL 33126

(City/State and Zip Code)

For further information concerning this matter, please call:

ANGEL D CORDOVA

_{...}305

444-5511

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

🔀 \$25,00 Filing Fee and Certificate of Dissolution

☐ \$55.06 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 BEST OCEAN INVESTMENTS LLC	2019 OCT 24 PM 2: 11	
2.	The Articles of Organization were filed on JUNE 4, 2008		
	document number L08000055268		
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not b listed as the document's effective date on the Department of State's records.		
4,	. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707. Florida Statutes, (copy 605.0707 on back cover letter).		
DISPOSITION OF ALL ASSETS			
5.	If there are no members, enter the name and address of the person a activities and affairs:	ppointed to wind up the company's	
6. lis	Signature of an authorized person of if there are no members, the signature to wind up the company's activities and affairs:		
	Signature VICTOR AMI	GO Printed Name	
	FILING FEE: \$25.00		