

209 000013486

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

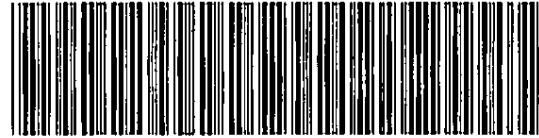
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100380078021

02/01/22--01008--003 **25.00

FILED

2022 FEB -1 PM 7:50

SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMC
FEB 09 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SEASIDE CITY 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:

D. RUBEN FAJARDO JR

(Name of Person)

FAJARDO & ASSOCIATES, LLC

(Firm/Company)

1550 MADRUGA AVENUE, SUITE 500

(Address)

CORAL GABLES, FL 33146

(City/State and Zip Code)

For further information concerning this matter, please call:

D. RUBEN FAJARDO JR

(Name of Person)

305

322-1155

at ()

(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

1. The name of a limited liability company is
SEASIDE CITY LLC

2022 FEB -1 PM 7:50

2. The Articles of Organization were filed on 02/10/2009
document number L09000013486

SECRETARY OF STATE
TALLAHASSEE, FL
and assigned

3. The delayed effective date the dissolution if not effective on the date of filing: 12/31/2021
(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 be 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).

The company no longer is needed as the sole piece of real estate it owned was sold during 2021.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Signature

Eric Friedberg/Francine LeFrak

Printed Name

FILING FEE: \$25.00