L100000 \$2011

(Requestor's Name)							
(Address)							
(Add	ress)	<u>-</u>					
(City/State/Zip/Phone #)							
PICK-UP	WAIT	MAIL					
(Busi	iness Entity Na	me)					
(Document Number)							
Certified Copies	Certificate	s of Status					
Special Instructions to Filing Officer:							

Office Use Only



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15 JAN 12 AH 8: 19
SECRETARY OF STATE
TALL AHASSEE FLORIDA

J. Shines JAN 22 2015

COVER LETTER

Divisio	n of Corporations								
SUBJECT: FI	Florida Vacation Beach Rentals LLC								
	(Name of Limited Liability Company)								
The enclosed Ar	ticles of Dissolution and fee(s) are submitted	for filing.							
Please return all	correspondence concerning this matter to the	following:							
	William J. Waterman								
	(Name of Person)								
	Florida Vacation Beach Rentals LLC								
	(Firm/C	Company)							
	PO Box 643717								
	(Ad	dress)							
	Vero Beach, Florida 32964								
	(City/State a	ınd Zip Code)							
For further infor	mation concerning this matter, please call:								
Willia	m J. Waterman	772 at (567-7821						
	(Name of Person)	(Area Coo	de & Daytime Telephone Number)						
Enclosed is a chec	k for the following amount:								
✓ \$25 .00 I	Filing Fee and Certificate of Dissolution	- \$55.00 Filing	Fee, Certificate of Dissolution &						

MAILING ADDRESS:

TO:

Registration Section

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

Certified Copy (additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability	company is			
	Florida Vacation Beach R	entals LLC			
	The Articles of Organization w document number <u>L1000005</u>	2011		and assigned	
3.	The delayed effective date the control (effective date	lissolution if not ef cannot be prior to or n	fective on the date of fili nore than 90 days later than da	ing: 1/15/15 tte document is received	for filing)
4.	A description of occurrence tha 605.0707, Florida Statutes, (cop Sale of assets	t resulted in the lin y 605,0707 on back	nited liability company's k cover letter).	dissolution pursua	nt to section
				<u> </u>	- 5
				CS	JA
				<u> </u>	-2-
				SSS	N [**
5.	If there are no members, enter t	he name and addre	ss of the person appointe	ed to wind up the co	mpany's
	activities and affairs:			<u> </u>	9
	_				
6. lis	Signature of an authorized pers	on or if there are no ny's activities and	o members, the signature affairs:	of the person appo	inted and
	1-	1/15	William J. Waterr		√lembei
	Signature		Print	ted Name	
	\checkmark	FILING	FEE: \$25.00		

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Florida Vacation Beach Rentals LLC	
Document number of Limited Liability Company is: L10000052011	
Date of dissolution was: 1/15/15	
Description of information that must be included in a written claim:	
	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
PO Box 643717	
Vero Beach, FL 32964	
	
A claim against the above named limited liability company will be barred unless a proceeding to en	
claim is commenced within 4 years after the filing of this notice.	nforce the

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

Printed Name of the Person Filing

Signature of the Person Filing