

L12000147896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

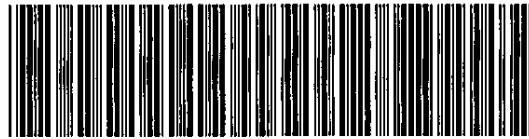
(Business Entity Name)

(Document Number)

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CLERK OF SUPERIOR COURT
TALLAHASSEE FLORIDA

FEB 07 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WEST COAST RESTORATION, LLC

DOCUMENT NUMBER: L12000147896

The enclosed **Notice of Limited Liability Company Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ABNER BRINGAS

(Name of Contact Person)

(Firm/Company)

3708 ARGON DR

(Address)

TAMPA, FL 33619

(City/State and Zip Code)

For further information concerning this matter, please call:

ABNER BRINGAS

(Name of Contact Person)

at (**813**) **4706272**

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy
(Additional copy is enclosed) ☐ \$60 Filing Fee, Certificate of Status & Certified Copy
(Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Notice of Limited Liability Company Dissolution

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: WEST COAST RESTORATION, LLC

Date of dissolution was: 1/20/2014

Description of information that must be included in a written claim:

WEST COAST RESTORATION, LLC

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

3708 ARGON DR
TAMPA, FL 33619

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

ABNER BRINGAS

Printed Name of the Person Filing



Signature of the Person Filing

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TALLAHASSEE FLORIDA