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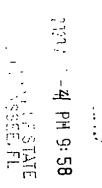
(Requestor's Name)  (Address)  (Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Special Instructions to Filing Officer:

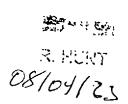
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## **COVER LETTER**

Registration Section Division of Corporations WS OCEAN SANDS HOSPITALITY, LLC SUBJECT: (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: MICHAEL R. WALTERS (Name of Person) WS OCEAN SANDS HOSPITALITY, LLC (Firm/Company) 130 SOUTH SERENATA DRIVE, UNIT 223 (Address) PONTE VEDRA BEACH, FL 32082 (City/State and Zip Code) For further information concerning this matter, please call: 745-0811 MICHAEL R. WALTERS (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: ☐ \$55.00 Filing Fee. Certificate of Dissolution & \$25.00 Filing Fee and Certificate of Dissolution Certified Copy (additional copy is enclosed) Mailing Address: **Street Address:** 

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

TO:

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

1. The name of a limited liab	ility company is			
WS OCEAN SANDS	HOSPITALITY, LLC			
2. The Articles of Organizati	on were filed on	an	d assigned	
document numberL1200	0149533			
Note: If the date inserted in	the dissolution if not effective or we date cannot be prior to or more than 9 in this block does not meet the applica ective date on the Department of Stat	ble statutory filing requi	THE IS LOCAL OF	I for filing) date will not be
605.0707, Florida Statutes	ce that resulted in the limited liabi (copy 605.0707 on back cover le	ility company's dissolu atter).	ition pursum	nt to section
BUSINESS SOLD		<del>_</del>		<del></del>
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			NEWS NEWS	
5. If there are no members, e	nter the name and address of the	person appointed to wir	nd up the co	mpany's
activities and affairs:	MICHAEL R. WALTERS		FLE	<u>කි</u> කි
	130 SOUTH SERENATA DRIV	VE, UNIT 223		
	PONTE VEDRA BEACH, FL	32082		<del></del>
	<del></del>			<del></del>
<ol><li>Signature of an authorized above to wind up the compan</li></ol>	person or if there are no members y's activities and affairs:	s, the signature of the p	erson appoi	inted and liste
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intro	MICI	HAEL R. WALTERS		. 1=
Signature		Printed Nam	ne	

FILING FEE: \$25.00