

Division of Corporations

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# 2130000 23876

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : PAUL E. GEORGASIAN, P.A.  
Account Number : I20100000012  
Phone : (561) 391-4700  
Fax Number : (561) 391-4766

## LLC DISSOLUTION OR WITHDRAWAL BAST TRACT 71, LLC

Certificate of Status	0
Certified Copy	0
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**H19000105008 3**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Bast Tract 71, 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:

Paul E. Ghougasian  
(Name of Person)

Paul E. Ghougasian, P.A.  
(Firm/Company)

2300 Glades Road, Suite 270W  
(Address)

Boca Raton, Florida 33431  
(City/State and Zip Code)

For further information concerning this matter, please call:

Paul E. Ghougasian at ( 561 ) 391-4700  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

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1. The name of a limited liability company is

Bast Tract 71, LLC

2. The Articles of Organization were filed on February 14, 2013 and assigned

document number L13000023876

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 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 consent of all the members of the above referenced limited liability company.

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

activities and affairs: N/A

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:

Helen T. Bast  
Signature

Helen T. Bast

Printed Name

**FILING FEE: \$25.00**

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