

L13000100946

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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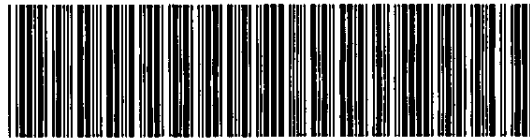
(Business Entity Name)

(Document Number)

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K. SALY
EXAMINER

MAR 22

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shore Mobile Marine Service LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Caschera

Name of Person

Shore Mobile Marine Service, LLC

Firm/Company

22 Ulysses Tr.

Address

Palm Coast, FL 32164

City/State and Zip Code

lincaschera@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Caschera at (386) 237-8618

Name of Person

Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

KS
3/15

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: Shore Mobile Marine
Service LLC

SECOND: The Florida Document number of the limited liability company is: L13 000100946

THIRD: The date of filing of the initial articles of organization is: 7-16-13

FOURTH: The date of filing of the dissolution is: 3-15-16

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

Christopher Caschera Christopher Caschera
Signature of Authorized Representative Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA