## L13000145765

(Red	questor's Name)	
(Add	iress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
(011)	, otate zipi non	,
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificate:	s of Status
Special Instructions to f	Filing Officer:	

Office Use Only



900308128889

01/26/18--01010--005 \*\*100.00

18 JAN 26 AH 9: 39

J. LEGGETT JAN 29 2018

#### COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Shore I OE NSB LLC  Name of Limited Liability Company
The enclosed Statement of Revocation of Dissolution for Florida Limited Liability Company and fec(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Kenneth Bohannen  Contact Person
Kenneth Bohannon, Pl
221 N. Causeway Str. A.
New Sonyma Brach Fr 32/69 City, State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ASNY (anata =1,386,427-5227
Name of Contact Person Area Code Daytime Telephone Number

#### STREET 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, FL 32314

### STATEMENT OF REVOCATION OF DISSOLUTION FOR FLORIDA LIMITED LIABILITY COMPANY

Pursuant to section 605.0708. Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution.

CR2EI	Filing Fee: \$100.00 Certified Copy: \$30.00 (optional)	Hach is drawn in	18 JAN 26 AH 9 39	
5.	A copy of the Articles of Rissolution is attached.  Signature of person authorized to submit the revocation of dissolution			-
4.	The revocation of dissolution was authorized on	-··		
3.	The effective date the Dissolution was filed is	·-··-		
2.	The documen: number of the company is <u>L130001457465</u>			,
1.	The name of the company is: Shoreline NSB LLC	<del></del>		

# State of Florida Department of State

I certify from the records of this office that SHORELINE NSB, LLC was a limited liability company organized under the laws of the State of Florida, filed on October 16, 2013, effective October 16, 2013.

The document number of this limited liability company is L13000145765.

I further certify that said limited liability company was voluntarily dissolved on January 16, 2018, effective January 17, 2018.

Given under my hand and the Great Seal of Florida, at Tallahassee, the Capital, this the Seventeenth day of January, 2018

Secretary of State



Authentication ID: 500307951605-011718-1.13000145765

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

https://efile.sunbiz.org/certauthver.html