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SECRETARY STATE PALL AHASSEE, FI DRIED

COVER LETTER

TO:

Registration Section Division of Corporations

BEACHSIDE COASTAL ENTERPRISES, 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:

STEPHEN I. HUFF									
(Name of Person)									
N/A									
(Firm/Company)									
2222 TIMBERVIEW RO.									
(Address)									
ROANOKE, VA. 24019									
(City/State and Zip Code)									

For further information concerning this matter, please call:

STEPHEN I. HUFF
(Name of Person) at (540) 798 - 6475 (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

Street Address:

Registration Section **Division of Corporations** The Centre of Tallahassee

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

Ι.	The name of a limited liabili BEACHSIDE COAST		RPRIS	ES, LL	С					
2.	The Articles of Organization	were filed on	2-18	2014		_ and assig	gned			
	document number L1400	000279	60							
3.	The delayed effective date the (effective of Note: If the date inserted in the listed as the document's effective date.	nis block does no	of meet the ap	plicable stat	utory filing i				: be	
4.	A description of occurrence 605.0707, Florida Statutes, (c	that resulted in copy 605.0707	the limited on back cov	liability cor ver letter).	npany's dis	ssolution p	ursuant t	o sectior	1	
	SOLD ALL REAL E				ECTIVE	11-21-	2022	AND		
CEASED DOING BUSINESS IN FLORIDA.										
5.	If there are no members, enter activities and affairs:	er the name and			appointed t	o wind up	the comp	<u> </u>	"Ti	
		2222 TH	MBERV	IEW RE),		100 S	1	7.7	
		ROANOK	E, VA.	24019] = [0310 /	H 9: 44	C	
6. at	Signature of an authorized poove to wind up the company	erson or if there s activities and	e are no me affairs:	mbers, the s	ignature of	the persor	appointe	——— ed and li	sted	
	Typen I That	,		STEPI	HEN I Printed	. HUFI Name				

FILING FEE: \$25.00