

L14000035577

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE FLORIDA

APR 22 2015
CLERK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GULF COAST EQUITIES TITLE 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:

Carlotha Hall
(Name of Person)

Gulf Coast Equities Title, LLC
(Firm/Company)

710 Oakfield Dr #202
(Address)

Brandon FL 33511
(City/State and Zip Code)

For further information concerning this matter, please call:

Carlotha Hall at (727) 420-3977
(Name of Person) (Area Code & Daytime Telephone Number)

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DIVISION OF CORPORATIONS

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

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

1. The name of a limited liability company is

Gulf Coast Equities Title LLC

2. The Articles of Organization were filed on 3/3/2014 and assigned

document number L14000035577

3. The delayed effective date the dissolution is 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)

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).

Close of business.

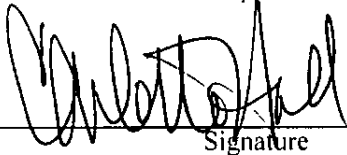
5. If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs:

Carlotta Hall
2036 Kings Palace Dr
Bra Riverview FL 33578

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TALLAHASSEE FLORIDA

FILED

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:


Signature

Carlotta Hall
Printed Name

FILING FEE: \$25.00