L14000037953

(Requesto	or's Name)		
(Address)			
(Address)			
(City/State	e/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Business	Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			





800399069148

12/19/22--01022--004 **25.00

2022 DEC 19 AM 7: 4.2



COVER LETTER

	tration Section ion of Corporations			
T SUBJECT: _	The Beach Dog. LEC			
3053601.	(Name of Limi	ted Liability Compa	(ny)	
	Articles of Dissolution and fee(s) are submi	_		
	Geoff Moser			
	(Na	me of Person)		
	The Beach Dog			2022 DEC 19
	(Fit	mvCompany)		——————————————————————————————————————
	920 NW 12th Ave			ري ^{-ر}
		(Address)		——SG ♣
	Cape Coral, Fl. 33993			
	(City/St	ate and Zip Code)		m N
For further info	ormation concerning this matter, please call	l:		
Geoff	`Mosei	239 at (994-3528	
	(Name of Person)	(Area C	ode & Daytime Telephor	ne Number)
Enclosed is a ch	eck for the following amount:			
\$25,00	9 Filing Fee and Certificate of Dissolution		g Fee, Certificate of Disso lopy (additional copy is o	
Regi Divis P.O.	ng Address: stration Section sion of Corporations Box 6327 chassee, FL 32314	The Centre		210

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited lial	bility company is		
The Beach Dog, LLC			·
2. The Articles of Organizat	ion were filed on 03/06/2014	and assi	igned
document number L14000	0037953		
Note: If the date inserted i	e the dissolution if not effective ive date cannot be prior to or more than it this block does not meet the applifective date on the Department of S	cable statutory filing requirement	received for tiling)
4. A description of occurren 605,0707, Florida Statutes	ce that resulted in the limited lia , (copy 605.0707 on back cover	bility company's dissolution letter).	pursuant to section
Closing business due to Hura	ricane lan		202
			022 DEC
			- SS
			9 AH 7: ASSEE, F
5. If there are no members, of activities and affairs:	enter the name and address of the Geoffrey Moser, 920 NW 12th		the company
 Signature of an authorized above to wind up the compart 	d person or if there are no memb ny's activities and affairs:	pers, the signature of the person	on appointed and listed
9171 Ma		Beoff N	10Ser
Signature		Printed Name	

FULING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712. F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company:		
Document number of Limited Liability Company is: L14000037953		
Date of dissolution was:		
Description of information that must be included in a written claim:	MIL	2022 DEC
Business closing due to Hurricane Ian	AHA	6
	SSET SSET	AH
	S TA	7: 6
	[7]	100
		
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corpor	rations)	
A claim against the above named limited liability company will be barred unless a proceed claim is commenced within 4 years after the filing of this notice.	ing to enfo	rce the
Geotfrey Moser	1	
Printed Name of the Person Filing Segrature Service Person	n Filing	

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00