# L15000208054

(Re	equestor's Name)					
(Ac	ldress)					
(Ac	ddress)					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Вс	usiness Entity Nan	ne)				
(Document Number)						
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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

## <sub>r.</sub> Moyna Properties Suncoast 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:

Dawn Moyna
(Name of Person)
Moyna Properties Inc
(Firm/Company)
621 NW 53 St Suite 395
(Address)
Boca Raton, FI 33487
(City/State and Zip Code)

For further information concerning this matter, please call:

Dawn Moyna	at (
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(Name of Person)

(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 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 liabil	ity company is					
	Moyna Properties Suncoast LI	.C					
2.	The Articles of Organization			and assigned			
	document number L1500020	8054					
3.	The delayed effective date t (effective Note: If the date inserted in the series of th	he dissolution if not effective date cannot be prior to or more than his block does not meet the appli tive date on the Department of St	cable statutory filing re	ocument is received for this			
4.	A description of occurrence	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 05.0707, Florida Statutes, (copy 605.0707 on back cover letter).					
	no longer needed	copy 605.0707 on back cover	letter).				
	no longer needed						
				34) [7]	16		
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				ර්ගින් ලබන්	<del>-</del> 2		
5.	If there are no members, ent	er the name and address of th	e person appointed to	o wind up the compan	產		
	activities and affairs:	Dawn Moyna		200	<del>∵.</del> '. -⊌n		
		530 67 St		\$. \$.	Œ.		
		Holmes Beach, Fl 34217					
6. lis	Signature of an authorized pated above to wind up the con	person or if there are no memb npany's activities and affairs:	pers, the signature of	the person appointed	 and		
	Daux 6	Day	vn Moyna				
	Signature Signature		Printed	Name			

FILING FEE: \$25.00