

L17000 157053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

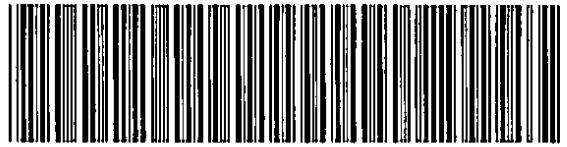
(Business Entity Name)

(Document Number)

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2020 AUG -3 PM 4:04  
SECRETARY OF STATE  
TALLAHASSEE, FL

25 2020

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 4853 Coquina Crossing Dr. 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:

Richard Mendelson

\_\_\_\_\_  
(Name of Person)

4853 Coquina Crossing Dr., LLC

\_\_\_\_\_  
(Firm/Company)

234 Otero Point

\_\_\_\_\_  
(Address)

Saint Augustine, Fl., 32095

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Mendelson

\_\_\_\_\_  
(Name of Person)

845

826-5908

at (\_\_\_\_\_) \_\_\_\_\_

(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

1. The name of a limited liability company is

4853 Coquina Crossing Dr., LLC

2. The Articles of Organization were filed on 7/24/2017 and assigned

document number L17000157053

3. The delayed effective date the dissolution if not effective on the date of filing: 7/29/2020

(effective date cannot be prior to or more than 90 days later than date document is received for filing)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Single family house that was used as a rental is no longer used as a rental, but used as a secondary residence.

Single family house that was used as a rental is no longer used as a rental, but used as a secondary residence.

Single family house that was used as a rental is no longer used as a rental, but used as a secondary residence.

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

activities and affairs:

Richard Mendelson

234 Otero Point

Saint Augustine, Fla., 32095

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

Richard Mendelson

Printed Name

**FILING FEE: \$25.00**

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