# 47000 205092

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
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#### COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: 30A PARKING, 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:

### SHANNON L WIDMAN (Name of Person) PORATH & ASSOCIATES, PA (Firm/Company) 600 GRAND BLVD #201 (Address) DESTIN, FL 32550

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

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 liabi	lity company is		The state of the	
2.	The Articles of Organization	on were filed on 10/	/25/17	and assigned	
	document number L170002	205092			
3.	The delayed effective date the dissolution if 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)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not blisted as the document's effective date on the Department of State's records.				
4.	A description of occurrence 605.0707, Florida Statutes.	e that resulted in the (copy 605.0707 on	e limited liability company's diss back cover letter).	olution pursuant to section	
	SALE OF ASSETS AND VOTE OF MEMBERSHIP WITH MANAGER APPROVAL.				
5.	If there are no members, en	nter the name and ad	ddress of the person appointed to	wind up the company's	
		1875 S CO HWY	393		
		SANTA ROSA BI	EACH, FL 32459		
6. lis	Signature of an authorized sted above to wind up the co	person or if there ar mpany's activities a	re no members, the signature of t and affairs:	he person appointed and	
	John 1. Oli		THOMAS T GALLION IV	,	
Signature			Printed N	Printed Name	

**FILING FEE: \$25.00**