

L17000 238063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

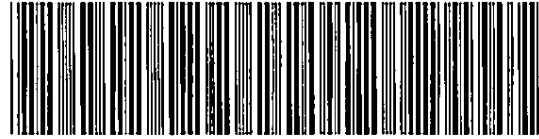
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/16/20--01004--007 **25.00

Effective Date 09/01/2020

FILED
CLERK OF SUPERIOR COURT
2017215 PM 3:17

Dissolution

APR 28 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Coral 2 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:

Vito Pucci
(Name of Person)
CORAL 2 LLC
(Firm/Company)
6597 Nicholas Blvd
(Address)
NAPLES, FL 34108
(City/State and Zip Code)

For further information concerning this matter, please call:

Vito Pucci at 203, 856-9842
(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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

2007 16 PM 3:17
DIVISION OF STATE
CORPORATIONS

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

1. The name of a limited liability company is

CORAL 2, LLC

2. The Articles of Organization were filed on 5/19/2011 and assigned

document number L 17000238063

3. The delayed effective date the dissolution if not effective on the date of filing: MAY 1 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).

NO LONGER IN BUSINESS

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

Vito Pucci

6597 NICHOLAS BLVD

NAPLES, FL 34108

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

Vito Pucci
Printed Name

FILING FEE: \$25.00

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DEPT. OF STATE
CLERK OF STATE