

L17000259320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED
2023 APR 12 AM 9:45
CLERK OF STATE
TALLAHASSEE, FL
2023 APR 12 PM 3:40
RECEIVED

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 669138 4311863

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : April 12, 2023

ORDER TIME : 12:56 PM

ORDER NO. : 669138-005

CUSTOMER NO: 4311863

DOMESTIC FILINGS

NAME: NUSRET SOUTH BEACH LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson - EXT#

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nusret South Beach 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:

Ivy M. Shapiro, Paralegal

(Name of Person)

Blank Rome LLP

(Firm/Company)

One Logan Square

(Address)

Philadelphia, PA 19103

(City/State and Zip Code)

For further information concerning this matter, please call:

Ivy M. Shapiro _____ at (_____) _____

(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 Address:

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

FILED

2023 APR 12 AM 9:45

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

DEPARTMENT OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is
Nusret South Beach LLC

2. The Articles of Organization were filed on 12/20/2017 and assigned
document number L17000259320

3. The delayed effective date the dissolution is 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 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).

The consent of all of the members in accordance with Section 605.0701(2).

The consent of all of the members in accordance with Section 605.0701(2).

The consent of all of the members in accordance with Section 605.0701(2).

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

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

Printed Name

SABAN DEGIRMENCIOGLU

FILING FEE: \$25.00