L18000203638

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basiless Zilat, Name,
(Designant Number)
(Document Number)
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11/09/20--01013--006 **25.00

9EC 1 5 2929 S. YOUNG



COVER LETTER

TO: Registration Section
SUBJECT:
The enclosed Articles of Dissolution and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Sun Coast Walking Tours LLC (Firm/Company) Auf Ont Fl. 33707
(City/State and Zip Code)
For further information concerning this matter, please call:
AUPA Deut at (727) 687-8785 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\square \text{S25.00 Filing Fee and Certificate of Dissolution}} \square \text{S55.00 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
	SUNCOAST WAIKING 1001'S LLC'
2.	The Articles of Organization were filed on Aug. 25, 2018 and assigned

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	document number <u>L 8.000 403</u> 6 38	
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 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).	
	Business Closed.	
	1 Ctiled	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's	
	activities and affairs:	
	LAURA Dent	
	2850 59 th st. 5. Unit.	
	Gulfport Fl. 3370)	
6. al	Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove ho wind up the company's activities and affairs:	
	Houma Laura Dent	
FILING FEE: \$25.00		

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