L18000203868

(Requestor's Name)
(Address)
(100.000)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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MAY 1 2 ZUZU I ALBRITTON

COVER LETTER

TO: Registration Section

Division 10 f Corporations LLC is closed. No Jonger in Business linknown DOCUMENT NULL MBER: Limited Liability Company Dissolution and fee are submitted for filing. Please return all cor respondence concerning this matter to the following: (City/State and Zip Code) For further informat ion concerning this matter, please call: The of Contact Person at (Ho) 610-6234

(Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: □\$25 Filing Fee □\$30 Filing Fee & □\$55 Filing Fee & □\$60 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified (Additional copy is enclosed) Copy (Additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

RECEIVED



FLORIDA DEPARTMENT OF STATE 1 9:56 Division of Corporations

April 20, 2020

ELANA COHEN P.O. BOX 5824 KNOXVILLE, TN 37917

SUBJECT: COASTAL 3 INVESTMENTS LLC

Ref. Number: L18000203868

We have received your document for COASTAL 3 INVESTMENTS LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call

Irene Albritton Regulatory Specialist II

Letter Number: 320A00008214

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is (24) 3 Investments (LC
2,	The Articles of Organization were filed on 8 24 2019 and assigned
	document number <u>L18000 203468</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: (offective date caused be prior to or more than 90 days later than date document is received for tring) Note: If the date inserted in this block does not meet the applicable structory filing requirements, this date will not be listed as the document's offective 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).
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	بې
	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: 9/ana Congn
	PO BOX 234055
	Encinitas, Ca 97023
б. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
	Slam Cohin
	Sigenfure Printed Name
	FILING FEE: \$25,00