

L18000220763

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

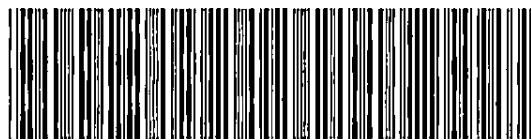
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 NOV 29 PM 7:54

2018 NOV 29 AM 11:39  
TALLAHASSEE, FLORIDA

FILED

O SIMMONS  
NOV 30 2018

# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 11/29/2018

Acc#I20160000072

*en: c DW*

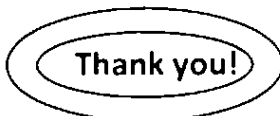
Name:	Coastal Builders & Construction, LLC
Document #:	
Order #:	11276513

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$	100
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Coastal Builders & Construction, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Statement of Revocation of Dissolution for Florida Limited Liability Company and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Dominic Michael Albero, PE, PMP

\_\_\_\_\_  
Contact Person

Coastal Builders & Construction, LLC

\_\_\_\_\_  
Firm/Company

101 INDUSTRIAL LOOP NORTH

\_\_\_\_\_  
Address

ORANGE PARK, FL 32073

\_\_\_\_\_  
City, State and Zip Code

nick.albero@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nick Albero

at ( 757 )

633 4649

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**STATEMENT OF REVOCATION OF DISSOLUTION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

Pursuant to section 605.0708, Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution.

1. The name of the company is: Coastal Builders & Construction, L.L.C
2. The document number of the company is L18000220763
3. The effective date the Dissolution was filed is 10/24/2018
4. The revocation of dissolution was authorized on 11/28/2018
5. A copy of the Articles of Dissolution is attached.

*Dominic Michael Alberio*

Signature of person authorized to submit the revocation of dissolution

Filing Fee:      \$100.00  
Certified Copy: \$30.00 (optional)

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED  
18 OCT 24 AM 10:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
Coastal Builders & Construction LLC

2. The Articles of Organization were filed on 09/17/2018 and assigned  
document number LI8000220763

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).  
Filed the incorporation in error. Would like to re-domesticate this South Carolina corp to a Florida domestic.

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

101 Industrial Loop

North Orange Park, FL 32073

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:

Dominic Michael Alberio  
Signature

Dominic Michael Alberio, PE, PMP  
Printed Name

FILING FEE: \$25.00