1190000 48815

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(De	ocument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

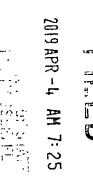
Office Use Only

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C. GOLDEN APR - 5 2019

COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations				
SUBJECT: Pura Vida Vistas, 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:				
Ma it h A ida				
Maribob Amidon (Name of Person)				
Pura Vida Vista LLC (Firm/Company)				
· · · · · · · · · · · · · · · · · · ·				
312 2 d Ave				
(Address)				
Melbourne Beach FL (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
7.5. Estatet mismaston concerning uns matter, prease can.				
(Name of Person) at (301) 604-071 (Area Code & Daytime Telephone Number)				
(Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee and Certificate of Dissolution \$\square\$ \$55.00 Filing Fee. Certificate of Dissolution & Certified Copy (additional copy) is graphered.				
Certified Copy (additional copy is enclosed)				
MAILING ADDRESS: STREET/COURIER ADDRESS:				
Registration Section Registration Section				
Division of Corporations Division of Corporations				

Tallahassee, FL 32301

Clifton Building
2661 Executive Center Circle



March 22, 2019

MARIBOB AMIDON 312 2ND AVENUE MELBOURNE BEACH, FL 32960

SUBJECT: PURA VIDA VISTA LLC Ref. Number: L19000048815

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You must list the address of the person appointed to wind up the company's activities and affairs.

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 (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 019A00005674

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

1. The name of a limited liability company is	2019 APR -4	AH 7:	25
Pura Vida Vista, LLC		-:: 3 <i>16</i>	47.5
2. The Articles of Organization were filed on OR 19 12019 and	AL ARA Lassigned	BSEE, F	
document number <u>L1900048815</u>			
3. The delayed effective date the dissolution if not effective on the date of filing:			
 A description of occurrence that resulted in the limited liability company's dissolu 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). 	ition pursuant to sec	ction	
The delay of getting it on	Sunhiz	Paul-	
by my CPA, did not allow	M 8	_	
to put my property in LLC	at-	-	
time of closing		_	
5. If there are no members, enter the name and address of the person appointed to wit	nd up the company	·s	
activities and affairs: Mari Anison		_	
312 2°d Ave		_	
Melbourne Bch,	FL 329	J)	
		_	
6. Signature of an authorized person or if there are no members, the signature of the plisted above to wind up the company's activities and affairs:	person appointed ar	ıd	
	1		
Mari den Mari f Signature Printed Nam	<u>Locainal</u>	_	

FILING FEE: \$25.00