

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

LLC DISSOLUTION OR WITHDRAWAL
GULF COAST SC, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

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**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Gulf Coast SC, LLC

2. The Articles of Organization were filed on 12/18/2020 and assigned

document number L20000391364

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).

The occurrence that led to the dissolution of the limited liability company was the authorization and direction

given to the Manager of the Company to execute and file Articles of Dissolution on behalf of the Company.

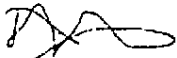
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: National Breathe Free Sinus and Allergy Centers c/o Lisa Anderson

c/o Lisa Anderson

2021 K Street, NW #600

Washington, DC 20006

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

Nabil Matthew Ghanem, Manager of
National Breathe Free Sinus and Allergy Centers

Printed Name

FILING FEE: \$25.00

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